| Fill in this information to identify your case: |                               |                                    |
|---|-------------------------------|------------------------------------|
| United States Bankruptcy Court for the:         |                               |                                    |
| EASTERN DISTRICT OF MISSOURI                    | <u>-</u>                      |                                    |
| Case number (if known)                          | Chapter you are filing under: |                                    |
|   | ☐ Chapter 7                   |                                    |
|   | ☐ Chapter 11                  |                                    |
|   | ☐ Chapter 12                  |                                    |
|   | ■ Chapter 13                  | Check if this is an amended filing |

## Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

02/20

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Identify Y   | ourself   |   |   |   |
|----|--|---|---|---|---|
|    |  |   | About Debtor 1:   |   | About Debtor 2 (Spouse Only in a Joint Case):                     |
| 1. | Your full name   | •   |   |   |   |
|    | Write the name your governme picture identific example, your clicense or pass Bring your pictuidentification to meeting with the | nt-issued<br>ation (for<br>driver's<br>sport).<br>ure<br>your | Kobi First name  K Middle name  Gilkey Last name and Suffix (Sr., Jr., II, III) | _ | First name  Middle name  Last name and Suffix (Sr., Jr., II, III) |
| 2. | All other name<br>used in the las<br>Include your ma<br>maiden names.  | st 8 years<br>arried or                                       |   |   |   |
| 3. | Only the last 4<br>your Social Se<br>number or fed<br>Individual Tax<br>Identification I   | ecurity<br>eral<br>payer                                      | xxx-xx-7185   |   |   |

Debtor 1 Kobi K Gilkey

Case number (if known)

|  |   | About Debtor 1:  | About Debtor 2 (Spouse Only in a Joint Case):  |  |  |  |  |
|--|---|--|--|--|--|--|--|
| 4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years  Include trade names and doing business as names |   | ■ I have not used any business name or EINs.  Business name(s)   | ☐ I have not used any business name or EINs.  Business name(s)   |  |  |  |  |
| 5.   | Where you live  |  | If Debtor 2 lives at a different address:  |  |  |  |  |
|  |   | 9132 Darnell Place Saint Louis, MO 63136  Number, Street, City, State & ZIP Code  Saint Louis  County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | Number, Street, City, State & ZIP Code  County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |  |  |  |  |
|  |   | Number, P.O. Box, Street, City, State & ZIP Code   | Number, P.O. Box, Street, City, State & ZIP Code   |  |  |  |  |
| 6.   | Why you are choosing this district to file for bankruptcy | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)  | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)  |  |  |  |  |

Debtor 1 Kobi K Gilkey Pg 3 of 50

Case number (if known)

| 7.       | The chapter of the Bankruptcy Code you are  |             |  |   | n of each, see <i>Notice Required by</i> a<br>of page 1 and check the appropriate                                | 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy box.   |  |  |
|----------|---|-------------|--|---|--|---|--|--|
|          | choosing to file under  | ☐ Chapter 7 |  |   |  |   |  |  |
|          |   | □с          | hapter 11  |   |  |   |  |  |
|          |   | □с          | hapter 12  |   |  |   |  |  |
|          |   | <b>■</b> C  | hapter 13  |   |  |   |  |  |
| 3.       | How you will pay the fee  | •           | about how yo                                       | u may pay. Ty <sub>l</sub><br>attorney is sub         | pically, if you are paying the fee yo  | with the clerk's office in your local court for more details urself, you may pay with cash, cashier's check, or money llf, your attorney may pay with a credit card or check with   |  |  |
|          |   |             |  |   | stallments. If you choose this option ts (Official Form 103A).   | n, sign and attach the Application for Individuals to Pay   |  |  |
|          |   |             | I request that<br>but is not req<br>applies to you | t my fee be wa<br>uired to, waive<br>ur family size a | <b>aived</b> (You may request this option your fee, and may do so only if yound you are unable to pay the fee in | only if you are filing for Chapter 7. By law, a judge may, ur income is less than 150% of the official poverty line that installments). If you choose this option, you must fill out ial Form 103B) and file it with your petition. |  |  |
| <b>.</b> | Have you filed for  | ■ No        |  | The riave the   |  | an one ready and no k man year pention.   |  |  |
|          | bankruptcy within the last 8 years?   | ■ No        |  |   |  |   |  |  |
|          |   |             | District   |   | When   | Case number   |  |  |
|          |   |             | District   |   | When   | Case number   |  |  |
|          |   |             | District   |   | When   | Case number   |  |  |
| 0.       | Are any bankruptcy cases pending or being   | ■ No        | 0  |   |  |   |  |  |
|          | filed by a spouse who is<br>not filing this case with<br>you, or by a business<br>partner, or by an<br>affiliate? | □ Ye        | es.  |   |  |   |  |  |
|          |   |             | Debtor   |   |  | Relationship to you   |  |  |
|          |   |             | District   |   | When   | Case number, if known   |  |  |
|          |   |             | Debtor   |   |  | Relationship to you   |  |  |
|          |   |             | District   |   | When   | Case number, if known   |  |  |
| 1.       | Do you rent your residence?   | ■ No        | Go to I  | ne 12.  |  |   |  |  |
|          | residence:  | □ Ye        | es. Has yo   | ur landlord obt                                       | ained an eviction judgment against   | you?  |  |  |
|          |   |             |  | No. Go to line  | 12   |   |  |  |
|          |   |             |  |   | 12.  |   |  |  |

Debtor 1 Kobi K Gilkey Pg 4 of 50

Case number (if known)

| Part | Report About Any Bu   | sinesses ` | You Owr                                  | as a Sole Propriet  | or  |  |  |
|------|---|------------|--|---|---|--|--|
| 12.  | Are you a sole proprietor of any full- or part-time business?   | ■ No.      | Go to                                    | Part 4.   |   |  |  |
|      |   | ☐ Yes.     | Name                                     | and location of busi  | ness  |  |  |
|      | A sole proprietorship is a<br>business you operate as<br>an individual, and is not a<br>separate legal entity such<br>as a corporation,<br>partnership, or LLC. |            | Name                                     | Name of business, if any  |   |  |  |
|      | If you have more than one sole proprietorship, use a separate sheet and attach  |            | Numb                                     | oer, Street, City, State  | e & ZIP Code  |  |  |
|      | it to this petition.  |            | Chec                                     | k the appropriate box   | k to describe your business:  |  |  |
|      |   |            |  | Health Care Busin   | ess (as defined in 11 U.S.C. § 101(27A))  |  |  |
|      |   |            |  | Single Asset Real   | Estate (as defined in 11 U.S.C. § 101(51B))   |  |  |
|      |   |            |  | Stockbroker (as de  | efined in 11 U.S.C. § 101(53A))   |  |  |
|      |   |            |  | Commodity Broker  | r (as defined in 11 U.S.C. § 101(6))  |  |  |
|      |   |            |  | None of the above   |   |  |  |
| 13.  | Are you filing under<br>Chapter 11 of the<br>Bankruptcy Code and are<br>you a small business<br>debtor?   | deadlines  | s. If you ir<br>s, cash-fl<br>.C. § 1110 | ndicate that you are a<br>ow statement, and fo<br>5(1)(B).  | court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure |  |  |
|      | For a definition of small   | ■ No.      | I am r                                   | not filing under Chap   | ter 11.   |  |  |
|      | business debtor, see 11 U.S.C. § 101(51D).  | □ No.      | I am f<br>Code                           | am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ode. |   |  |  |
|      |   | ☐ Yes.     |  |   | 11, I am a small business debtor according to the definition in the Bankruptcy Code, and d under Subchapter V of Chapter 11.  |  |  |
|      |   | ☐ Yes.     |  | iling under Chapter 1<br>ed under Subchapte   | I1, I am a debtor according to the definition in the Bankruptcy Code, and I choose to r V of Chapter 11.  |  |  |
| Pari | Report if You Own or  | Have Any   | Hazardo                                  | ous Property or Any   | Property That Needs Immediate Attention   |  |  |
| 14.  | Do you own or have any property that poses or is alleged to pose a threat of imminent and   | ■ No.      | What is                                  | the hazard?   |   |  |  |
|      | identifiable hazard to<br>public health or safety?<br>Or do you own any<br>property that needs<br>immediate attention?  |            |  | diate attention is why is it needed?  |   |  |  |
|      | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?   |            | Where is                                 | s the property?   |   |  |  |
|      |   |            |  |   | Number, Street, City, State & Zip Code  |  |  |
|      |   |            |  |   |   |  |  |

Debtor 1 Kobi K Gilkey

Part 5:

**Explain Your Efforts to Receive a Briefing About Credit Counseling** 

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

| Par                              | t 6: Answer These Quest   | ions for R   | eporting Purposes                    |   |  |  |  |  |
|----------------------------------|---|--|--------------------------------------|---|--|--|--|--|
|                                  | What kind of debts do you have?   | 16a.   | individual primarily for a per       | consumer debts? Consumer debts are cronal, family, or household purpose."             | defined in 11 U.S.C. § 101(8) as "incurred by an   |  |  |  |
|                                  |   |  | ☐ No. Go to line 16b.                |   |  |  |  |  |
|                                  |   |  | Yes. Go to line 17.                  |   |  |  |  |  |
|                                  |   | 16b.   |                                      | <b>Dusiness debts?</b> Business debts are de restment or through the operation of the |  |  |  |  |
|                                  |   |  | ☐ No. Go to line 16c.                | Ç ,   |  |  |  |  |
|                                  |   |  | ☐ Yes. Go to line 17.                |   |  |  |  |  |
|                                  |   | 16c.   | State the type of debts you          | owe that are not consumer debts or business.  | iness debts  |  |  |  |
| 17.                              | Are you filing under<br>Chapter 7?  | ■ No.  | I am not filing under Chapte         | er 7. Go to line 18.  |  |  |  |  |
|                                  | Do you estimate that after any exempt property is excluded and                          | ☐ Yes.   |                                      | Do you estimate that after any exempt p vailable to distribute to unsecured credit    | property is excluded and administrative expenses ors?  |  |  |  |
|                                  | administrative expenses   |  | □ No                                 |   |  |  |  |  |
|                                  | are paid that funds will<br>be available for<br>distribution to unsecured<br>creditors? |  | ☐ Yes                                |   |  |  |  |  |
| 18.                              | How many Creditors do   | <b>1</b> -49   |                                      | □ 1,000-5,000   | □ 25,001-50,000  |  |  |  |
|                                  | you estimate that you owe?  | ☐ 50-99  |                                      | ☐ 5001-10,000   | <b>5</b> 0,001-100,000   |  |  |  |
|                                  |   | □ 100-1<br>□ 200-9   |                                      | □ 10,001-25,000   | ☐ More than100,000   |  |  |  |
| 19.                              | How much do you estimate your assets to   | <b>\$0 - \$</b>  | 50,000                               | □ \$1,000,001 - \$10 million  | ☐ \$500,000,001 - \$1 billion  |  |  |  |
|                                  | be worth?   | □ \$50,001 - \$100,000<br>□ \$100,001 - \$500,000  |                                      | □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million                          | ☐ \$1,000,000,001 - \$10 billion<br>☐ \$10,000,000,001 - \$50 billion                        |  |  |  |
|                                  |   |  | 001 - \$500,000<br>001 - \$1 million | □ \$100,000,001 - \$500 million   | ☐ More than \$50 billion   |  |  |  |
| 20.                              | How much do you estimate your liabilities   | <b>\$0 - \$</b>  |                                      | □ \$1,000,001 - \$10 million  | □ \$500,000,001 - \$1 billion  |  |  |  |
|                                  | to be?  | □ \$50,001 - \$100,000<br>□ \$100,001 - \$500,000  |                                      | ☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million                          | □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion                           |  |  |  |
|                                  |   |  | 001 - \$500,000<br>001 - \$1 million | □ \$100,000,001 - \$500 million   | ☐ More than \$50 billion   |  |  |  |
| Par                              | t 7: Sign Below   |  |                                      |   |  |  |  |  |
| For you                          |   | I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. |                                      |   |  |  |  |  |
|                                  |   |  |                                      | 7, I am aware that I may proceed, if eligi relief available under each chapter, and   | ble, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7.         |  |  |  |
|                                  |   |  |                                      | not pay or agree to pay someone who is<br>he notice required by 11 U.S.C. § 342(b)    |  |  |  |  |
| I request relief in accordance v |   |  |                                      | chapter of title 11, United States Code,  | specified in this petition.  |  |  |  |
| ba<br>an                         |   |  | cy case can result in fines up       |   | ey or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519 |  |  |  |
|                                  |   | /s/ Kobi<br>Kobi K   | K Gilkey<br>Gilkev                   | Signature of De   | ebtor 2  |  |  |  |
|                                  |   |  | e of Debtor 1                        | - J •   |  |  |  |  |
|                                  |   | Executed   | May 5, 2022<br>MM / DD / YYYY        | Executed on _   | MM / DD / YYYY   |  |  |  |

Debtor 1 Kobi K Gilkey Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Robert      | Faerber                | Date          | May 5, 2022     |  |
|-----------------|------------------------|---------------|-----------------|--|
| Signature of    | Attorney for Debtor    |               | MM / DD / YYYY  |  |
| Robert Fa       | erber                  |               |                 |  |
| Printed name    |                        |               |                 |  |
| Robert Fa       | erber                  |               |                 |  |
| Firm name       |                        |               |                 |  |
| 230 S. Ber      | mistion                |               |                 |  |
| Suite 600       |                        |               |                 |  |
| Saint Loui      | is, MO 63105           |               |                 |  |
| Number, Street, | City, State & ZIP Code |               |                 |  |
| Contact phone   | (314)727-3434          | Email address | faerber@msn.com |  |
| 46794 MO        |                        |               |                 |  |
| Bar number & S  | state                  |               |                 |  |

| Fill in this information to identify your case: |               |                    |             |  |  |  |
|---|---------------|--------------------|-------------|--|--|--|
| Debtor 1  | Kobi K Gilkey |                    |             |  |  |  |
|   | First Name    | Middle Name        | Last Name   |  |  |  |
| Debtor 2  |               |                    |             |  |  |  |
| (Spouse if, filing)                             | First Name    | Middle Name        | Last Name   |  |  |  |
| United States Bankruptcy Court for the:         |               | EASTERN DISTRICT C | PF MISSOURI |  |  |  |
| Case number _                                   |               |                    |             |  |  |  |

☐ Check if this is an amended filing

### Official Form 106Sum

### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15 lying correct

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

|            | Summarize Your Assets  | Your a      | ssets<br>of what you own      |
|------------|--|-------------|-------------------------------|
| 1.         | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | \$          | 0.00                          |
|            | 1b. Copy line 62, Total personal property, from Schedule A/B   | \$          | 19,407.36                     |
|            | 1c. Copy line 63, Total of all property on Schedule A/B  | \$          | 19,407.36                     |
| Par        | t 2: Summarize Your Liabilities  |             |                               |
|            |  |             | <b>abilities</b><br>t you owe |
| 2.         | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$          | 18,000.00                     |
| 3.         | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                            | \$          | 0.00                          |
|            | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$          | 18,442.00                     |
|            | Your total liabilities   | \$          | 36,442.00                     |
| ⊃ar        | t 3: Summarize Your Income and Expenses  |             |                               |
| <b>1</b> . | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | \$          | 1,740.73                      |
| 5.         | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  | \$          | 1,145.00                      |
| Par        | t 4: Answer These Questions for Administrative and Statistical Records   |             |                               |
| 6.         | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you                     | r other scl | hedules.                      |
| 7.         | Yes What kind of debt do you have?   |             |                               |
|            | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a   | personal    | , family, or                  |

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

### Doc 1 Filed 05/05/22 Entered 05/05/22 15:51:00 Main Document Case 22-41362 Pg 9 of 50 Case number (if known)

Debtor 1 Kobi K Gilkey

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

2,715.45 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Total c | aim       |
|--|---------|-----------|
| From Part 4 on Schedule E/F, copy the following:   |         |           |
| 9a. Domestic support obligations (Copy line 6a.)   | \$      | 0.00      |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$      | 0.00      |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$      | 0.00      |
| 9d. Student loans. (Copy line 6f.)   | \$      | 10,916.00 |
| <ol> <li>Obligations arising out of a separation agreement or divorce that you did not report as<br/>priority claims. (Copy line 6g.)</li> </ol> | \$      | 0.00      |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)   | +\$     | 0.00      |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$      | 10,916.00 |

|                          | Case           | 22-41362                            | Doc 1            | Filed 05/05/2          | 22 Entered 05/05/22<br>Pg 10 of 50  | 2 15:51:00 N           | Iain Do     | cument                                       |
|--------------------------|----------------|-------------------------------------|------------------|------------------------|---|------------------------|-------------|--|
| Fill in th               | nis informa    | ation to identify                   | your case a      |                        | Pg 10-01-50   |                        |             |  |
| Debtor 1                 | 1              | Kobi K Gilk                         | 9.V              |                        |   |                        |             |  |
|                          |                | First Name                          | c y              | Middle Name            | Last Name   |                        |             |  |
| Debtor 2<br>(Spouse, if  |                | First Name                          |                  | Middle Name            | Last Name   |                        |             |  |
|                          | •              |                                     |                  |                        |   |                        |             |  |
| United S                 | States Banl    | kruptcy Court fo                    | r the: EAST      | ERN DISTRICT OF        | MISSOURI  |                        |             |  |
| Case nu                  | ımber          |                                     |                  |                        |   |                        |             | Check if this is an                          |
|                          |                |                                     |                  |                        |   |                        |             | amended filing                               |
|                          |                |                                     |                  |                        |   |                        |             |  |
| <b>Offici</b>            | al For         | m 106A/E                            | 3                |                        |   |                        |             |  |
| Sch                      | edule          | A/B: P                              | roperty          | V                      |   |                        |             | 12/15  |
| think it fit information | s best. Be     | as complete and<br>space is needed, | accurate as po   | ossible. If two marrie | nce. If an asset fits in more than o<br>d people are filing together, both a<br>n. On the top of any additional pag | re equally responsible | for supplyi | ing correct                                  |
| Part 1:                  | Describe E     | ach Residence, E                    | Building, Land,  | or Other Real Estate   | You Own or Have an Interest In  |                        |             |  |
| 1. <b>Do yo</b> ι        | ı own or ha    | ve any legal or e                   | quitable interes | st in any residence, k | ouilding, land, or similar property?  |                        |             |  |
| ■ No                     | Go to Part 2   | <b>)</b>                            |                  |                        |   |                        |             |  |
| _                        |                | he property?                        |                  |                        |   |                        |             |  |
|                          |                |                                     |                  |                        |   |                        |             |  |
| Dort 2                   | Deceribe V     | our Vehicles                        |                  |                        |   |                        |             |  |
| Part 2:                  | Describe 1     | our venicies                        |                  |                        |   |                        |             |  |
|                          |                |                                     |                  |                        | nicles, whether they are register<br>following the G: Executory Contracts and U                                     |                        | any vehicle | es you own that                              |
|                          |                | ·                                   |                  | •                      | •   | mexpired Leases.       |             |  |
| 3. <b>Cars</b> ,         | vans, truc     | ks, tractors, s                     | oort utility ve  | hicles, motorcycle     | es  |                        |             |  |
| ☐ No                     |                |                                     |                  |                        |   |                        |             |  |
| ■ Yes                    | 3              |                                     |                  |                        |   |                        |             |  |
|                          |                |                                     |                  |                        |   |                        |             |  |
| 3.1 N                    | lake: <b>G</b> | MC                                  |                  | Who has an inter       | est in the property? Check one  |                        |             | or exemptions. Put ims on <i>Schedule D:</i> |
| N                        |                | errain                              |                  | ■ Debtor 1 only        |   | •                      |             | ecured by Property.                          |
|                          |                | )20                                 |                  | Debtor 2 only          |   | Current value of       |             | rrent value of the                           |
|                          | pproximate     |                                     | 66,000           | Debtor 1 and D         | •   | entire property?       | ро          | rtion you own?                               |
|                          | ther informa   |                                     |                  | ☐ At least one of      | the debtors and another   |                        |             |  |
| R                        | eposses        | sed 4/27/22                         |                  | Charle if this i       |   | \$16,000               | 0.00        | \$16,000.00                                  |
|                          |                |                                     |                  | (see instructions)     | s community property  |                        |             | <b>4.0,000.00</b>                            |
|                          |                |                                     |                  |                        |   |                        |             |  |
|                          | oles: Boats    |                                     |                  |                        | al vehicles, other vehicles, and<br>sels, snowmobiles, motorcycle a   |                        |             |  |
|                          |                |                                     |                  |                        |   |                        |             |  |
|                          |                |                                     |                  |                        | ntries from Part 2, including an  |                        |             | \$16,000.00                                  |
|                          |                |                                     |                  |                        |   |                        | -           |  |

Official Form 106A/B Schedule A/B: Property page 1

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

Pg 11 of 50 Case number (if known) Debtor 1 Kobi K Gilkey 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe..... Household Goods The valuation of this property is based on an estimation of a hypothetical liquidation estate sale (yard sale). The value factors in varying age, wear and tear, and depreciation of the property considering the length of time that the Debtor has owned the property. The valuation assumes that a significant portion of the Debtor's property of this category is depreciate to the point where it has no re-sale value whatsoever. This is a layperson's valuation. The Debtor has no professional or specialized knowledge on how to value property or the likelihood of sale in the event of liquidation. The Debtor expressly reserves the right to assert a \$2,500.00 different value for insurance purposes and replacement. 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... Misc. Electronics \$300.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No ☐ Yes. Describe..... Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$200.00 Wearing Apparel 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ■ No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses

Official Form 106A/B Schedule A/B: Property page 2

■ No

☐ Yes. Describe.....

Filed 05/05/22 Entered 05/05/22 15:51:00 Case 22-41362 Doc 1 Main Document Pg 12 of 50 Case number (if known) Debtor 1 Kobi K Gilkey 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$3,000.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ No ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... **Bank of America** \$0.00 Checking 17.1. Chime \$300.00 Checking 17.2. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts □ No Institution or issuer name: ■ Yes..... Robin Hood Investment \$107.36 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

Institution name or individual:

■ No

☐ Yes. .....

Case number (if known) Debtor 1 Kobi K Gilkey 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information...... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation. Social Security benefits; unpaid loans you made to someone else No ☐ Yes. Give specific information... 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No ☐ Yes. Name the insurance company of each policy and list its value. Beneficiary: Surrender or refund Company name: value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim.......

Official Form 106A/B Schedule A/B: Property page 4

| Debto           | 1 Kobi K Gilkey  |                                    | Case number (if known)              |             |
|-----------------|--|------------------------------------|-------------------------------------|-------------|
| 34. <b>Ot</b> l | ner contingent and unliquidated claims of every nature   | , including counterclaims o        | of the debtor and rights to set off | claims      |
|                 | No   |                                    |                                     |             |
|                 | es. Describe each claim  |                                    |                                     |             |
| 35. <b>A</b> n  | y financial assets you did not already list  |                                    |                                     |             |
|                 | No   |                                    |                                     |             |
|                 | es. Give specific information  |                                    |                                     |             |
|                 | dd the dollar value of all of your entries from Part 4, in pr Part 4. Write that number here               |                                    | • •                                 | \$407.36    |
| Part 5:         | Describe Any Business-Related Property You Own or Have a   | nn Interest In. List any real esta | ate in Part 1.                      |             |
| 37. <b>Do</b> : | you own or have any legal or equitable interest in any busines   | s-related property?                |                                     |             |
| ■ N             | p. Go to Part 6.   |                                    |                                     |             |
| ☐ Ye            | es. Go to line 38.   |                                    |                                     |             |
| Part 6:         |  | rty You Own or Have an Interes     | st In.                              |             |
|                 | If you own or have an interest in farmland, list it in Part 1.   |                                    |                                     |             |
|                 | you own or have any legal or equitable interest in any   | farm- or commercial fishin         | g-related property?                 |             |
|                 | No. Go to Part 7.  |                                    |                                     |             |
|                 | Yes. Go to line 47.  |                                    |                                     |             |
| Part 7:         | Describe All Property You Own or Have an Interest in Ti  | hat You Did Not List Ahove         |                                     |             |
|                 |  |                                    |                                     |             |
|                 | you have other property of any kind you did not alread<br>camples: Season tickets, country club membership | dy list?                           |                                     |             |
|                 | No   |                                    |                                     |             |
|                 | es. Give specific information  |                                    |                                     |             |
| 54. <b>A</b>    | dd the dollar value of all of your entries from Part 7. W  | rite that number here              |                                     | \$0.00      |
|                 | •  |                                    |                                     | ·           |
| Part 8:         | List the Totals of Each Part of this Form  |                                    |                                     |             |
| 55. <b>P</b>    | art 1: Total real estate, line 2   |                                    |                                     | \$0.00      |
| 56. <b>P</b>    | art 2: Total vehicles, line 5  | \$16,000.00                        |                                     |             |
| 57. <b>P</b>    | art 3: Total personal and household items, line 15   | \$3,000.00                         |                                     |             |
|                 | art 4: Total financial assets, line 36   | \$407.36                           |                                     |             |
|                 | art 5: Total business-related property, line 45  | \$0.00                             |                                     |             |
|                 | art 6: Total farm- and fishing-related property, line 52   | \$0.00                             |                                     |             |
| 61. <b>P</b>    | art 7: Total other property not listed, line 54  | +\$0.00                            |                                     |             |
| 62. <b>T</b>    | otal personal property. Add lines 56 through 61  | \$19,407.36                        | Copy personal property total        | \$19,407.36 |
| 63. <b>T</b>    | otal of all property on Schedule A/B. Add line 55 + line 6   | 62                                 |                                     | \$19,407.36 |

Official Form 106A/B Schedule A/B: Property page 5

| Fill in this inform | nation to identify your | case:              |            |                                      |
|---------------------|-------------------------|--------------------|------------|--------------------------------------|
| Debtor 1            | Kobi K Gilkey           |                    |            |                                      |
|                     | First Name              | Middle Name        | Last Name  |                                      |
| Debtor 2            |                         |                    |            |                                      |
| (Spouse if, filing) | First Name              | Middle Name        | Last Name  |                                      |
| United States Ba    | nkruptcy Court for the: | EASTERN DISTRICT O | F MISSOURI |                                      |
| Case number         |                         |                    |            | ☐ Check if this is an amended filing |

### Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/22

Specific laws that allow exemption

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Amount of the exemption you claim

| Part 1: | Identify the | Property | You Claim | as Exempt |
|---------|--------------|----------|-----------|-----------|
|---------|--------------|----------|-----------|-----------|

Brief description of the property and line on

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the

| ochedule A/B that hat's this property  | portion you own                     |     |   |                     |
|--|-------------------------------------|-----|---|---------------------|
|  | Copy the value from<br>Schedule A/B | Che | ck only one box for each exemption.                             |                     |
| Household Goods The valuation of this property is  | \$2,500.00                          | •   | \$2,500.00  | RSMo § 513.430.1(1) |
| based on an estimation of a hypothetical liquidation estate sale (yard sale). The value factors in varying age, wear and tear, and depreciation of the property considering the length of time that the Debt Line from Schedule A/B: 6.1 |                                     |     | 100% of fair market value, up to any applicable statutory limit |                     |
| Misc. Electronics Line from Schedule A/B: 7.1  | \$300.00                            |     | \$300.00  | RSMo § 513.430.1(1) |
| Line Holli Govedale 775. FT  |                                     |     | 100% of fair market value, up to any applicable statutory limit |                     |
| Wearing Apparel Line from Schedule A/B: 11.1   | \$200.00                            |     | \$200.00  | RSMo § 513.430.1(1) |
| Zino nom concedure 702.  |                                     |     | 100% of fair market value, up to any applicable statutory limit |                     |
| Checking: Chime Line from Schedule A/B: 17.2   | \$300.00                            |     | \$300.00  | RSMo § 513.430.1(3) |
| Line from Goriodale PVD. 1112  |                                     |     | 100% of fair market value, up to any applicable statutory limit |                     |

| Debtor | r1 Kobi K Gilkey |   |                                      | Case number (if known) |   |                                    |
|--------|------------------|---|--------------------------------------|------------------------|---|------------------------------------|
|        |                  | cription of the property and line on A/B that lists this property | Current value of the portion you own | Am                     | ount of the exemption you claim                                 | Specific laws that allow exemption |
|        |                  |   | Copy the value from<br>Schedule A/B  | Che                    | ck only one box for each exemption.                             |                                    |
| _      |                  | lood Investment  Schedule A/B: 18.1                               | \$107.36                             |                        | \$107.36  | RSMo § 513.430.1(3)                |
| L      | ine nom          | Scriedule A/B. 10.1   |                                      |                        | 100% of fair market value, up to any applicable statutory limit |                                    |
|        | •                | claiming a homestead exemption to adjustment on 4/01/25 and every |                                      |                        | led on or after the date of adjustme                            | nt.)                               |
|        | No               |   |                                      |                        |   |                                    |
|        | ☐ Yes            | . Did you acquire the property cover                              | ed by the exemption wi               | thin 1                 | ,215 days before you filed this case                            | ?                                  |
|        |                  | No  |                                      |                        |   |                                    |
|        |                  | Yes   |                                      |                        |   |                                    |

| Case 2                                  | 22-41362 D              | 0C 1 Filed 05/05/22 Entered 0<br>Pa 17 of 50   | 15/05/22 15:51:  | oo man doc                                   | ument                    |
|---|-------------------------|--|--|--|--------------------------|
| Fill in this informa                    | ation to identify you   |  |  |  |                          |
| Debtor 1                                | Kobi K Gilkey           | Middle Name Last Name  |  |  |                          |
| Debtor 2                                | First Name              | Middle Name Last Name  |  |  |                          |
| (Spouse if, filing)                     | First Name              | Middle Name Last Name  |  |  |                          |
| United States Bank                      | cruptcy Court for the   | EASTERN DISTRICT OF MISSOURI   |  |  |                          |
| Case number                             |                         |  |  |  |                          |
| (if known)                              |                         |  |  | _  | if this is an            |
|   |                         |  |  | ameno  | led filing               |
| Official Form                           | 106D                    |  |  |  |                          |
|   |                         | Who Have Claims Secured  | by Property  | y  | 12/15                    |
|   |                         | If two married people are filing together, both are equout, number the entries, and attach it to this form. Or |  |  |                          |
| • • •                                   | ave claims secured by   | y your property?   |  |  |                          |
| ☐ No. Check the                         | his box and submit t    | his form to the court with your other schedules. Yo  | ou have nothing else to                                | o report on this form.                       |                          |
| Yes. Fill in a                          | all of the information  | below  | _  | ·  |                          |
|   | Secured Claims          | 20.0   |  |  |                          |
|   |                         | more than one secured claim, list the creditor separately  | Column A   | Column B                                     | Column C                 |
| for each claim. If mor                  | e than one creditor has | a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.         | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 Santander                           |                         | Describe the property that secures the claim:  | \$18,000.00  | \$16,000.00                                  | \$2,000.00               |
| Creditor's Name                         |                         | 2020 GMC Terrain 66,000 miles<br>Repossessed 4/27/22   | <u> </u>   | <u> </u>                                     |                          |
| PO Box 660<br>Dallas, TX 7              |                         | As of the date you file, the claim is: Check all that apply.   |  |  |                          |
|   | City, State & Zip Code  | ☐ Contingent ☐ Unliquidated  |  |  |                          |
| ,, .                                    | ,, <u></u> ,            | ☐ Disputed   |  |  |                          |
| Who owes the debt                       | t? Check one.           | Nature of lien. Check all that apply.  |  |  |                          |
| Debtor 1 only                           |                         | ☐ An agreement you made (such as mortgage or sec   | ured   |  |                          |
| Debtor 2 only                           |                         | car loan)  |  |  |                          |
| Debtor 1 and Debt                       | •                       | ☐ Statutory lien (such as tax lien, mechanic's lien)   |  |  |                          |
| At least one of the                     |                         | Judgment lien from a lawsuit   |  |  |                          |
| ☐ Check if this clair<br>community debt |                         | Other (including a right to offset)  Auto Loan   |  |  |                          |

\$18,000.00 Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. \$18,000.00 Write that number here:

Last 4 digits of account number

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

9344

Date debt was incurred 04/2021

|  | Case 22-41362 Doc.  | L Filed 05/05   | 122 Entered<br>Pa 18 of 50   | 05/05/22 15:51:00  | Main Document  |
|--|---|---|--|--|--|
| Fill in thi  | s information to identify your cas  | se:   | Pg 18 01 50  |  |  |
| Debtor 1   | Kobi K Gilkey   |   |  |  |  |
| DCD(OI I   | First Name  | Middle Name   | Last Name  |  |  |
| Debtor 2   |   |   |  |  |  |
| (Spouse if, f  | iling) First Name   | Middle Name   | Last Name  |  |  |
| United St  | ates Bankruptcy Court for the:  | ASTERN DISTRICT   | OF MISSOURI  |  |  |
| Case nur   | mber  |   |  |  |  |
| (if known)   |   |   |  |  | ☐ Check if this is an  |
|  |   |   |  |  | amended filing   |
| Official   | Form 106E/F   |   |  |  |  |
|  | ule E/F: Creditors Wh   | o Have Unsec  | ured Claims  |  | 12/15  |
| ny execut<br>Schedule (<br>Schedule I<br>eft. Attach | ory contracts or unexpired leases that<br>G: Executory Contracts and Unexpire<br>D: Creditors Who Have Claims Secure              | at could result in a clair<br>d Leases (Official Form<br>d by Property. If more s | n. Also list executory<br>106G). Do not include<br>space is needed, copy | contracts on Schedule A/B: P<br>any creditors with partially so<br>the Part you need, fill it out, r | PRIORITY claims. List the other party property (Official Form 106A/B) and on ecured claims that are listed in number the entries in the boxes on the prof any additional pages, write your |
| Part 1:  | List All of Your PRIORITY Unse  | cured Claims  |  |  |  |
| 1. Do an   | y creditors have priority unsecured c   | laims against you?  |  |  |  |
| ■ No   | o. Go to Part 2.  |   |  |  |  |
| ☐ Ye   | es.   |   |  |  |  |
|  | •   |   |  |  |  |
| Part 2:  | List All of Your NONPRIORITY  |   |  |  |  |
| 3. Do an   | y creditors have nonpriority unsecur  | ed claims against you?  |  |  |  |
| ☐ No   | o. You have nothing to report in this part.   | Submit this form to the o   | court with your other sch  | edules.  |  |
| ■ Ye   | S.  |   |  |  |  |
| unsec  | Il of your nonpriority unsecured claim ured claim, list the creditor separately fo one creditor holds a particular claim, list to | r each claim. For each cl   | aim listed, identify what  | type of claim it is. Do not list cla   | ims already included in Part 1. If more  |
|  |   |   |  |  | Total claim  |
|  | Banfield Pet Hospital   | Last 4 digi   | ts of account number   |  | \$527.00   |
|  | Ionpriority Creditor's Name   | When wee  | the debt incurred?   | 12/25/2017   |  |
|  | :/o IC System<br>PO Box 64378   | when was  | the debt incurred?   | 12/23/2017   |  |
| 5  | St. Paul, MN 55164  |   |  |  |  |
|  | lumber Street City State Zip Code   | As of the o   | late you file, the claim   | is: Check all that apply   |  |
| _  | Who incurred the debt? Check one.   | _   |  |  |  |
| _  | Debtor 1 only   | ☐ Conting   |  |  |  |
|  | Debtor 2 only   | ☐ Unliquid  |  |  |  |
| _  | Debtor 1 and Debtor 2 only  | ☐ Dispute   | d<br>DNPRIORITY unsecure   | nd claim:  |  |
|  | At least one of the debtors and another   | ,   |  | a Galli.   |  |
|  | ☐ Check if this claim is for a commulebt  | iity  |  | aration agreement or divorce that  | at you did not   |
|  | s the claim subject to offset?  |   | riority claims   | a.a.s.r agroomont of alvoide the   | a. Jou aid not   |
|  | No  | ☐ Debts to  | pension or profit-shari  | ng plans, and other similar debts  | 8  |

☐ Yes

■ Other. Specify service

| Debto | or 1 Kobi K Gilkey   | Case number (if known)   |            |
|-------|--|--|------------|
| 4.2   | Caine & Weiner   | Last 4 digits of account number  | \$406.00   |
|       | Nonpriority Creditor's Name PO Box 55848 Sherman Oaks, CA 91413      | When was the debt incurred? 9-21   |            |
|       | Number Street City State Zip Code Who incurred the debt? Check one.  | As of the date you file, the claim is: Check all that apply  |            |
|       | ■ Debtor 1 only  | ☐ Contingent   |            |
|       | Debtor 2 only  | ☐ Unliquidated   |            |
|       | Debtor 1 and Debtor 2 only   | □ Disputed   |            |
|       | ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecured claim:   |            |
|       | ☐ Check if this claim is for a community                             | ☐ Student loans  |            |
|       | debt Is the claim subject to offset?                                 | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims                |            |
|       | ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts  |            |
|       | Yes  | Other. Specify back rent   |            |
| 4.3   | Charter Communications   | Last 4 digits of account number  | \$534.00   |
|       | Nonpriority Creditor's Name c/o CBE Group                            | When was the debt incurred? 12-21  |            |
|       | 1309 Technology Parkway<br>Cedar Falls, IA 50613                     | when was the debt incurred? 12-21  |            |
|       | Number Street City State Zip Code  Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply  |            |
|       | ■ Debtor 1 only  | ☐ Contingent   |            |
|       | Debtor 2 only  | ☐ Unliquidated   |            |
|       | Debtor 1 and Debtor 2 only   | □ Disputed   |            |
|       | ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecured claim:   |            |
|       | ☐ Check if this claim is for a community                             | ☐ Student loans  |            |
|       | debt Is the claim subject to offset?                                 | $\hfill \Box$<br>Obligations arising out of a separation agreement or divorce that you did not report as priority claims |            |
|       | ■ No   | $\square$ Debts to pension or profit-sharing plans, and other similar debts  |            |
|       | Yes  | Other. Specify _ service   |            |
| 4.4   | Harris Stowe Nonpriority Creditor's Name                             | Last 4 digits of account number  | \$2,027.00 |
|       | 3026 Laclede<br>St. Louis, MO 63103                                  | When was the debt incurred? 12-19  |            |
|       | Number Street City State Zip Code Who incurred the debt? Check one.  | As of the date you file, the claim is: Check all that apply  |            |
|       | ■ Debtor 1 only  | ☐ Contingent   |            |
|       | Debtor 2 only  | □ Unliquidated   |            |
|       | ☐ Debtor 1 and Debtor 2 only   | □ Disputed   |            |
|       | ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecured claim:   |            |
|       | ☐ Check if this claim is for a community                             | ☐ Student loans  |            |
|       | debt Is the claim subject to offset?                                 | Obligations arising out of a separation agreement or divorce that you did not report as priority claims                  |            |
|       | ■ No   | $\square$ Debts to pension or profit-sharing plans, and other similar debts  |            |
|       | Yes  | Other. Specify books   |            |

Case 22-41362 Doc 1 Filed 05/05/22 Entered 05/05/22 15:51:00 Main Document Pg 20 of 50 Case number (if known)

| Deptor | 1 Kobi K Gilkey  | Case number (if known)   |          |
|--------|--|--|----------|
| 4.5    | Internal Revenue Service   | Last 4 digits of account number  | \$0.00   |
|        | Nonpriority Creditor's Name PO Box 7346 Philadelphia BA 10101                                | When was the debt incurred?  |          |
|        | Philadelphia, PA 19101  Number Street City State Zip Code  Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply  |          |
|        | _  |  |          |
|        | Debtor 1 only  | Contingent   |          |
|        | Debtor 2 only  | Unliquidated   |          |
|        | Debtor 1 and Debtor 2 only   | Disputed   |          |
|        | At least one of the debtors and another  | Type of NONPRIORITY unsecured claim:  ☐ Student loans  |          |
|        | ☐ Check if this claim is for a community debt  Is the claim subject to offset?               | ☐ Obligations arising out of a separation agreement or divorce that you did not  |          |
|        |  | report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts                           |          |
|        | No   |  |          |
|        | ☐ Yes  | ■ Other. Specify Notice Only   |          |
| 4.6    | Lend Nation  | Last 4 digits of account number  | \$265.00 |
|        | Nonpriority Creditor's Name<br>9905 St. Charles Rock Road<br>Saint Ann, MO 63074             | When was the debt incurred? 2016   |          |
|        | Number Street City State Zip Code  | As of the date you file, the claim is: Check all that apply  |          |
|        | Who incurred the debt? Check one.  |  |          |
|        | ■ Debtor 1 only  | ☐ Contingent   |          |
|        | ☐ Debtor 2 only  | ☐ Unliquidated   |          |
|        | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |          |
|        | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured claim:   |          |
|        | ☐ Check if this claim is for a community   | ☐ Student loans  |          |
|        | debt Is the claim subject to offset?   | $\hfill \Box$<br>Obligations arising out of a separation agreement or divorce that you did not report as priority claims |          |
|        | No   | $\square$ Debts to pension or profit-sharing plans, and other similar debts  |          |
|        | Yes  | Other. Specify payday loan   |          |
| 4.7    | Liberty Mutual   | Last 4 digits of account number  | \$701.00 |
|        | Nonpriority Creditor's Name 1 Liberty Square Mishawaka, IN 46544                             | When was the debt incurred? 11-21  |          |
|        | Number Street City State Zip Code  Who incurred the debt? Check one.                         | As of the date you file, the claim is: Check all that apply  |          |
|        | ■ Debtor 1 only  | ☐ Contingent   |          |
|        | Debtor 2 only  | ☐ Unliquidated   |          |
|        | Debtor 1 and Debtor 2 only   | ☐ Disputed   |          |
|        | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured claim:   |          |
|        | ☐ Check if this claim is for a community   | ☐ Student loans  |          |
|        | debt Is the claim subject to offset?   | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims                |          |
|        | ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts  |          |
|        | □Yes   | ■ Other. Specify car insurance   |          |
|        |  | - · · · <del></del>  |          |

Case 22-41362 Doc 1 Filed 05/05/22 Entered 05/05/22 15:51:00 Main Document Pg 21 of 50 Case number (#known)

| Missouri Department of Revenue                                       | Last 4 digits of account number   | \$0.00      |
|--|---|-------------|
| Nonpriority Creditor's Name  | When was the debt incurred?   |             |
| PO Box 475   |   |             |
| Jefferson City, MO 65105   |   |             |
| Number Street City State Zip Code  Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply   |             |
|  |   |             |
| Debtor 1 only  | Contingent  |             |
| Debtor 2 only  | Unliquidated  |             |
| Debtor 1 and Debtor 2 only   | Disputed  |             |
| At least one of the debtors and another                              | Type of NONPRIORITY unsecured claim:  Student loans   |             |
| ☐ Check if this claim is for a community debt                        | <u> </u>  |             |
| s the claim subject to offset?                                       | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |             |
| ■ No   | Debts to pension or profit-sharing plans, and other similar debts   |             |
| ☐ Yes  | Other. Specify Notice Only  |             |
| Missouri Title Loan  | Last 4 digits of account number   | \$350.00    |
| Nonpriority Creditor's Name  |   | <del></del> |
| 6985 Olive Blvd  | When was the debt incurred? 8-19  |             |
| St. Louis, MO 63130  Number Street City State Zip Code               | As of the date you file, the claim is: Check all that apply   |             |
| Who incurred the debt? Check one.                                    | ,   |             |
| ■ Debtor 1 only  | ☐ Contingent  |             |
| Debtor 2 only  | □ Unliquidated  |             |
| Debtor 1 and Debtor 2 only   | □ Disputed  |             |
| ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecured claim:  |             |
| ☐ Check if this claim is for a community                             | ☐ Student loans   |             |
| lebt   | ☐ Obligations arising out of a separation agreement or divorce that you did not                           |             |
| s the claim subject to offset?                                       | report as priority claims   |             |
| No   | Debts to pension or profit-sharing plans, and other similar debts   |             |
| □Yes   | Other. Specify payday loan  |             |
| Portfolio Recovery   | Last 4 digits of account number   | \$216.00    |
| Nonpriority Creditor's Name  |   | <del></del> |
| 120 Corporate Blvd.<br>Norfolk, VA 23502                             | When was the debt incurred? 1-21  |             |
| Number Street City State Zip Code                                    | As of the date you file, the claim is: Check all that apply   |             |
| Who incurred the debt? Check one.                                    |   |             |
| Debtor 1 only  | ☐ Contingent  |             |
| Debtor 2 only  | ☐ Unliquidated  |             |
| Debtor 1 and Debtor 2 only   | ☐ Disputed  |             |
| At least one of the debtors and another                              | Type of NONPRIORITY unsecured claim:  |             |
| Check if this claim is for a community                               | Student loans   |             |
| debt<br>Is the claim subject to offset?                              | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims  |             |
| No   | □ Debts to pension or profit-sharing plans, and other similar debts                                       |             |
|  |   |             |
| ☐ Yes  | ■ Other. Specify credit card  |             |

| Deptor   | 1 Kobi K Gilkey   | Case number (if known)   |             |
|----------|---|--|-------------|
| 4.1<br>1 | SC Wide LLC  Nonpriority Creditor's Name  1 North Taylor  Saint Louis, MO 63108  Number Street City State Zip Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt | Last 4 digits of account number  When was the debt incurred? 2020-2022  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not                     | \$2,500.00  |
|          | Is the claim subject to offset?  ■ No □ Yes   | report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify back rent   |             |
| 4.1      | United States Attorney Nonpriority Creditor's Name 111 South 10th Street 20th Floor Saint Louis, MO 63102   | Last 4 digits of account number  When was the debt incurred?   | \$0.00      |
|          | Number Street City State Zip Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No  | As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts |             |
|          | Yes   | ■ Other. Specify Notice Only   |             |
| 4.1      | US Department Of Education  Nonpriority Creditor's Name 2401 International Madison, WI 53704  Number Street City State Zip Code   | Last 4 digits of account number  When was the debt incurred?  O2/09/2014  As of the date you file, the claim is: Check all that apply  | \$10,916.00 |
|          | Who incurred the debt? Check one.  ■ Debtor 1 only  □ Debtor 2 only  □ Debtor 1 and Debtor 2 only  □ At least one of the debtors and another  □ Check if this claim is for a community debt  Is the claim subject to offset?  ■ No  □ Yes   | □ Contingent □ Unliquidated □ Disputed  Type of NONPRIORITY unsecured claim: ■ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify                                |             |

Part 3: List Others to Be Notified About a Debt That You Already Listed

student loan

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 1 Kobi K Gilkey

Case number (if known)

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|                       |     |   |     |    | Total Claim |
|-----------------------|-----|---|-----|----|-------------|
|                       | 6a. | Domestic support obligations  | 6a. | \$ | 0.00        |
| Total claims          |     |   |     |    |             |
| from Part 1           | 6b. | Taxes and certain other debts you owe the government                              | 6b. | \$ | 0.00        |
|                       | 6c. | Claims for death or personal injury while you were intoxicated                    | 6c. | \$ | 0.00        |
|                       | 6d. | Other. Add all other priority unsecured claims. Write that amount here.           | 6d. | \$ | 0.00        |
|                       | 6e. | Total Priority. Add lines 6a through 6d.  | 6e. | \$ | 0.00        |
|                       |     |   |     |    | Total Claim |
| Total                 | 6f. | Student loans   | 6f. | \$ | 10,916.00   |
| claims<br>from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that                 |     | •  | 0.00        |
|                       | CI- | you did not report as priority claims   | 6g. | \$ |             |
|                       | 6h. | Debts to pension or profit-sharing plans, and other similar debts                 | 6h. | \$ | 0.00        |
|                       | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 7,526.00    |
|                       | 6j. | Total Nonpriority. Add lines 6f through 6i.                                       | 6j. | \$ | 18,442.00   |

| Fill in this infor     | mation to identify your  | case:              |            |                       |
|------------------------|--------------------------|--------------------|------------|-----------------------|
| Debtor 1               | Kobi K Gilkey            |                    |            |                       |
|                        | First Name               | Middle Name        | Last Name  |                       |
| Debtor 2               |                          |                    |            |                       |
| (Spouse if, filing)    | First Name               | Middle Name        | Last Name  |                       |
| United States Ba       | ankruptcy Court for the: | EASTERN DISTRICT C | F MISSOURI |                       |
| Case number (if known) |                          |                    |            | <br>eck if this is an |

### Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| I   | Person or | company with | whom you have the | e contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|-------------------|---------------------|---|
| 2.1 |           |              |                   |                     |   |
|     | Name      |              |                   |                     |   |
|     | Number    | Street       |                   |                     |   |
|     | City      |              | State             | ZIP Code            |   |
| 2.2 |           |              |                   |                     |   |
|     | Name      |              |                   |                     |   |
|     | Number    | Street       |                   |                     | _                                       |
|     | City      |              | State             | ZIP Code            | _                                       |
| 2.3 |           |              | <u> </u>          | <u> </u>            |   |
|     | Name      |              |                   |                     |   |
|     | Number    | Street       |                   |                     |   |
|     | City      |              | State             | ZIP Code            | <u> </u>                                |
| 2.4 |           |              |                   |                     |   |
|     | Name      |              |                   |                     |   |
|     | Number    | Street       |                   |                     | _                                       |
|     | City      |              | State             | ZIP Code            | _                                       |
| 2.5 |           |              |                   |                     |   |
|     | Name      |              |                   |                     | _                                       |
|     | Number    | Street       |                   |                     |   |
|     | City      |              | State             | ZIP Code            | _                                       |

|                                     |  |  | Pa 25 of 50               |   |  |
|-------------------------------------|--|--|---------------------------|---|--|
| Fill in this info                   | ormation to identify your                                    | case:  |                           |   |  |
| Debtor 1                            | Kobi K Gilkey  |  |                           |   |  |
|                                     | First Name   | Middle Name  | Last Name                 |   |  |
| Debtor 2                            |  |  |                           |   |  |
| (Spouse if, filing)                 | First Name   | Middle Name  | Last Name                 |   |  |
| United States                       | Bankruptcy Court for the:                                    | EASTERN DISTRICT C                                   | F MISSOURI                |   |  |
| Casa number                         |  |  |                           |   |  |
| Case number (if known)              |  |  |                           |   | ☐ Check if this is an  |
|                                     |  |  |                           |   | amended filing   |
| ~ <i></i> –                         |  |  |                           |   |  |
| Official F                          | form 106H  |  |                           |   |  |
| Schedul                             | e H: Your Cod  | ebtors   |                           |   | 12/15  |
|                                     |  |  |                           |   |  |
| fill it out, and i<br>your name and | number the entries in the<br>d case number (if known)        | boxes on the left. Attach<br>. Answer every question | n the Additional Page t   | to this page. On the top                  | eeded, copy the Additional Page,<br>of any Additional Pages, write   |
| 1. Do you                           | have any codebtors? (If                                      | you are filing a joint case,                         | ao not list either spouse | as a codeptor.                            |  |
| ■ No                                |  |  |                           |   |  |
| ☐ Yes                               |  |  |                           |   |  |
|                                     | the last 8 years, have you<br>California, Idaho, Louisiana   |  |                           |   | states and territories include   |
| ■ No. Go                            |  |  |                           |   |  |
| ⊔ Yes. Di                           | d your spouse, former spo                                    | use, or legal equivalent live                        | e with you at the time?   |   |  |
| in line 2 a                         | igain as a codebtor only i<br>D), Schedule E/F (Officia      | f that person is a guaran                            | tor or cosigner. Make     | sure you have listed th                   | y with you. List the person shown<br>e creditor on Schedule D (Official<br>Schedule E/F, or Schedule G to fill |
|                                     | umn 1: Your codebtor<br>e, Number, Street, City, State and Z | P Code   |                           | Column 2: The cree<br>Check all schedules | ditor to whom you owe the debt s that apply:   |
| 3.1                                 |  |  |                           | ☐ Schedule D. line                        |  |
| Nam                                 | e  |  |                           | ☐ Schedule E/F, lii                       |  |
|                                     |  |  |                           | ☐ Schedule G, line                        |  |
| Num                                 | ber Street   |  |                           | _   |  |
| City                                | Dei Street   | State  | ZIP Code                  |   |  |
|                                     |  |  |                           |   |  |
| 3.2                                 |  |  |                           | ☐ Schedule D, line                        |  |
| Nam                                 | e  |  |                           | Schedule D, line                          |  |
|                                     |  |  |                           | ☐ Schedule G, line                        |  |
| Num                                 | ber Street   |  |                           | _   |  |
|                                     |  |  |                           |   |  |

ZIP Code

State

City

| C:II               | in this information to identify your  |   |   |                           |                         |                         |                                |                                   |
|--------------------|---|---|---|---------------------------|-------------------------|-------------------------|--------------------------------|-----------------------------------|
|                    | in this information to identify your optor 1 Kobi K Gilk  |   |   |                           |                         |                         |                                |                                   |
|                    | otor 2  |   |   |                           |                         |                         |                                |                                   |
|                    | ted States Bankruptcy Court for the   | e: _EASTERN DISTRICT  | OF MISSOURI                                 |                           |                         |                         |                                |                                   |
| (If kr             | se number   |   | -   |                           |                         |                         | ed filing                      | ostpetition chapter<br>wing date: |
|                    | fficial Form 106l<br>chedule I: Your Inc  |   |   |                           | N                       | 1M / DD/ Y              | YYY                            |                                   |
| sup<br>spo<br>atta | as complete and accurate as pos plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment | are married and not filing wing spouse is not filing wing the top of any additi | ng jointly, and your sith you, do not inclu | spouse is l<br>de informa | iving with<br>tion abou | you, incluted tyour spo | ude informati<br>ouse. If more | ion about your space is needed,   |
| 1.                 | Fill in your employment information.  |   | Debtor 1                                    |                           |                         | Debtor 2                | or non-filing                  | y spouse                          |
|                    | If you have more than one job,  | Employment status   | ■ Employed                                  |                           |                         | ☐ Emplo                 | oyed                           |                                   |
|                    | attach a separate page with information about additional  | Employment status   | ☐ Not employed                              |                           |                         | ☐ Not e                 | mployed                        |                                   |
|                    | employers.  | Occupation  | Driver                                      |                           |                         |                         |                                |                                   |
|                    | Include part-time, seasonal, or self-employed work.   | Employer's name   | Lyft  |                           |                         |                         |                                |                                   |
|                    | Occupation may include student or homemaker, if it applies.   | Employer's address  | 185 Berry Stree<br>San Francisco,           |                           |                         |                         |                                |                                   |
|                    |   | How long employed t   | here? <u>1 year</u>                         |                           |                         | _                       |                                |                                   |
| Par                | Give Details About Mo   | nthly Income  |   |                           |                         |                         |                                |                                   |
|                    | mate monthly income as of the duse unless you are separated.  | late you file this form. If   | you have nothing to re                      | eport for an              | y line, write           | e \$0 in the            | space. Includ                  | e your non-filing                 |
|                    | u or your non-filing spouse have m<br>e space, attach a separate sheet to   |   | ombine the informatio                       | n for all emp             | oloyers for             | that perso              | n on the lines                 | below. If you need                |
|                    |   |   |   |                           | For Del                 | btor 1                  | For Debtor                     |                                   |
| 2.                 | List monthly gross wages, sala deductions). If not paid monthly,  |   |   | 2.                        | \$3                     | ,384.53                 | \$                             | N/A                               |
| 3.                 | Estimate and list monthly over  | time pay.   |   | 3. +                      | \$                      | 0.00                    | +\$                            | N/A                               |

Official Form 106I Schedule I: Your Income page 1

Calculate gross Income. Add line 2 + line 3.

\$ 3,384.53

N/A

| Deb | tor 1                       | Kobi K Gilkey  | _                    | C  | ase numbe                           | er (if known)  |               |                      |                                 |                  |
|-----|-----------------------------|--|----------------------|----|-------------------------------------|--|---------------|----------------------|---------------------------------|------------------|
|     | Con                         | y line 4 here  | 4.                   |    | For Debto                           | or 1<br>3,384.53                                     |               | Debtor<br>i-filing s |                                 |                  |
| _   | •                           |  | ••                   |    | <u> </u>                            | 7,004.00   |               |                      | 14/74                           | _                |
| 5.  | 5a. 5b.                     | all payroll deductions:  Tax, Medicare, and Social Security deductions  Mandatory contributions for retirement plans   | 5a<br>5b             |    | \$                                  | 0.00   | \$_<br>\$     |                      | N/A<br>N/A                      | _                |
|     | 5c.<br>5d.                  | Voluntary contributions for retirement plans Required repayments of retirement fund loans  | 5c<br>5d             | ;. | \$<br>                              | 0.00   | \$<br>\$      |                      | N/A<br>N/A                      | _                |
|     | 5e.<br>5f.                  | Insurance Domestic support obligations   | 5e<br>5f.            |    | \$<br>\$                            | 0.00   | \$<br>        |                      | N/A<br>N/A                      | _                |
|     | 5g.<br>5h.                  | Union dues Other deductions. Specify: Estimated Payroll Taxes  | 5g<br>5h<br>         | ,  | \$<br>                              | 0.00<br>643.80                                       | *<br>+ *<br>_ |                      | N/A<br>N/A                      | _                |
| 6.  | Add                         | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.   | 6.                   |    | \$                                  | 643.80   | \$_           |                      | N/A                             | _                |
| 7.  | Cal                         | culate total monthly take-home pay. Subtract line 6 from line 4.   | 7.                   | ,  | \$2                                 | 2,740.73   | \$            |                      | N/A                             | _                |
| 8.  | 8b. 8c. 8d. 8e. 8f. 8g. 8h. | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends  Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation  Social Security  Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  Pension or retirement income  Other monthly income. Specify: | 8c<br>8d<br>8e<br>8e | ). | \$<br>\$<br>\$ \$<br>\$ \$<br>\$ \$ | 0.00<br>0.00<br>0.00<br>0.00<br>0.00<br>0.00<br>0.00 | \$ \$ \$ \$   |                      | N/A<br>N/A<br>N/A<br>N/A<br>N/A | -<br>-<br>-<br>- |
| 9.  | Add                         | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.   | 9.                   | \$ | -1                                  | ,000.00  | \$_           |                      | N/A                             | 4                |
| 10. |                             | culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.   | 10.                  | \$ | 1,740                               | ).73 + \$  |               | N/A                  | = \$ _                          | 1,740.73         |
| 11. | Inclu<br>othe               | te all other regular contributions to the expenses that you list in Schedule ade contributions from an unmarried partner, members of your household, your or friends or relatives. In the include any amounts already included in lines 2-10 or amounts that are not acify:  | depe                 |    | , ,                                 |  | ,             | Schedule<br>11.      |                                 | 0.00             |
| 12. |                             | I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies  |                      |    |                                     |  |               | . 12.                | \$                              | 1,740.73         |
| 13. | Do                          | you expect an increase or decrease within the year after you file this form  | ?                    |    |                                     |  |               |                      | Combine month!                  | ned<br>ly income |
|     |                             | No.  |                      |    |                                     |  |               |                      |                                 |                  |

Official Form 106l Schedule I: Your Income page 2

| Fill         | n this informa                                  | ation to identify y                | our case:                               |   |  |              |  |   |
|--------------|---|------------------------------------|---|---|--|--------------|--|---|
| Debt         | tor 1   | Kobi K Gilke                       | ev                                      |   |  | Che          | ck if this is:                         |   |
|              |   | -                                  |   |   |  | _            | An amended filing                      |   |
| Debt<br>(Spo | tor 2<br>ouse, if filing)                       |                                    |   |   |  |              | A supplement show<br>13 expenses as of | wing postpetition chapter the following date: |
| Unite        | ed States Bankr                                 | ruptcy Court for the               | e: EASTE                                | RN DISTRICT OF MISSO  | URI                                    |              | MM / DD / YYYY                         |   |
| Case         | e number  |                                    |   |   |  |              |  |   |
| 1            | nown)   |                                    |   |   |  |              |  |   |
| Of           | ficial Fo                                       | rm 106J                            |   |   |  |              |  |   |
| Sc           | chedule   | J: Your                            | Exper                                   | nses  |  |              |  | 12/15   |
| Be a         | as complete a<br>rmation. If m<br>nber (if know | and accurate as                    | s possible.<br>eded, atta<br>ry questio | . If two married people anch another sheet to this          |  |              |  |   |
| 1.           | Is this a joir                                  |                                    | enoia                                   |   |  |              |  |   |
|              | ■ No. Go to                                     |                                    | in a senar                              | ate household?  |  |              |  |   |
|              | □и  | lo                                 | ·                                       | al Form 106J-2, <i>Expenses</i>                             | s for Separate House                   | ehold of Deb | tor 2.                                 |   |
| 2.           | Do you have                                     | e dependents?                      | ■ No                                    |   |  |              |  |   |
|              | Do not list D<br>Debtor 2.                      | •                                  | ☐ Yes.                                  | Fill out this information for each dependent                | Dependent's relat<br>Debtor 1 or Debto |              | Dependent's age                        | Does dependent live with you?                 |
|              | Do not state dependents                         |                                    |   |   |  |              |  | □ No<br>□ Yes                                 |
|              |   |                                    |   |   |  |              |  | □ No<br>□ Yes                                 |
|              |   |                                    |   |   |  |              |  | □ Yes   |
|              |   |                                    |   |   |  |              |  | ☐ Yes   |
|              |   |                                    |   |   |  |              |  | □ No  |
| 3.           | Do your ove                                     | oenses include                     | _                                       |   | -                                      |              |  | ☐ Yes   |
| J.           | expenses o                                      | f people other t<br>d your depende | than $_{oldsymbol{\square}}$            | No<br>Yes   |  |              |  |   |
|              |   | ate Your Ongo                      |   |   |  |              |  |   |
| exp          |   |                                    |   | uptcy filing date unless y<br>y is filed. If this is a supp |  |              |  |   |
|              |   |                                    |   | government assistance i                                     |  |              |  |   |
|              | icial Form 10                                   |                                    |   |   |  |              | Your exp                               | enses   |
| 4.           |   | or home owners                     |   | ses for your residence. I                                   | nclude first mortgag                   | e<br>4. \$   | 8                                      | 300.00  |
|              | If not includ                                   | ded in line 4:                     |   |   |  |              |  |   |
|              | 4a. Real e                                      | estate taxes                       |   |   |  | 4a. S        | 6                                      | 0.00  |
|              |   | rty, homeowner'                    | s, or renter                            | 's insurance  |  | 4b. \$       |  | 0.00  |
|              |   |                                    |   | ıpkeep expenses   |  | 4c. §        |  | 0.00  |
| _            |   | owner's associa                    |   |   | and a move to                          | 4d. 9        |  | 0.00  |
| 5.           | Additional r                                    | mortgage paym                      | ents for yo                             | <b>our residence</b> , such as ho                           | me equity loans                        | 5. \$        | ·                                      | 0.00  |

| Deb | tor 1   | Kobi K G      | Bilkey  | Case n                                   | umb             | per (if known)   |                              |
|-----|---------|---------------|---|--|-----------------|------------------|------------------------------|
| 6.  | Utiliti | ies:          |   |  |                 |                  |                              |
| -   | 6a.     |               | heat, natural gas   | 6  | a.              | \$               | 0.00                         |
|     | 6b.     | Water, sev    | wer, garbage collection   | 6  | b.              | \$               | 0.00                         |
|     | 6c.     |               | e, cell phone, Internet, satellite, and cable services  | 6  | Sc.             | \$               | 0.00                         |
|     | 6d.     | Other. Spe    | ecify:  | 6  | id.             | \$               | 0.00                         |
| 7.  | Food    | •             | ekeeping supplies   |  | 7.              | \$               | 300.00                       |
| 8.  |         |               | hildren's education costs   |  | 8.              | \$               | 0.00                         |
| 9.  | Cloth   | ning, laund   | ry, and dry cleaning  |  | 9.              | \$               | 100.00                       |
| 10. |         | •             | products and services   | 1  | 0.              | \$               | 25.00                        |
|     |         | -             | ntal expenses   |  | 1.              | ·                | 25.00                        |
|     |         |               | Include gas, maintenance, bus or train fare.  |  |                 | •                |                              |
|     |         |               | ar payments.  | 1  | 2.              | \$               | 150.00                       |
| 13. |         |               | clubs, recreation, newspapers, magazines, and b   | ooks 1                                   | 3.              | \$               | 50.00                        |
| 14. | Char    | itable cont   | ributions and religious donations   | 1  | 4.              | \$               | 0.00                         |
| 15. | Insur   | rance.        |   |  |                 | -                |                              |
|     | Do no   | ot include in | surance deducted from your pay or included in lines   | 4 or 20.                                 |                 |                  |                              |
|     | 15a.    | Life insura   | ince  | 15                                       | a.              | \$               | 0.00                         |
|     | 15b.    | Health ins    | urance  | 15                                       | b.              | \$               | 0.00                         |
|     |         | Vehicle ins   |   | 15                                       | c.              | \$               | 100.00                       |
|     | 15d.    | Other insu    | rance. Specify:   | 15                                       | id.             | \$               | 0.00                         |
| 16. | Taxe    | s. Do not in  | clude taxes deducted from your pay or included in lii   | nes 4 or 20.                             |                 |                  |                              |
|     |         |               | onal Property Tax   | 1  | 6.              | \$               | 20.00                        |
| 17. |         |               | ease payments:  |  |                 |                  |                              |
|     |         |               | ents for Vehicle 1  |  | a.              | · —              | 0.00                         |
|     |         |               | ents for Vehicle 2  |  | b.              | ·                | 0.00                         |
|     |         | Other. Spe    | -   | 17                                       | c.              | \$               | 0.00                         |
|     |         | Other. Spe    |   |  | ď.              | \$               | 0.00                         |
| 18. |         |               | of alimony, maintenance, and support that you d   |  | _               | Φ.               | 0.00                         |
| 40  |         |               | your pay on line 5, Schedule I, Your Income (Office   | ,,a, , o,,,, , , , , , , , , , , , , , , | 8.              | \$               |                              |
| 19. |         |               | s you make to support others who do not live wit  | •  | _               | \$               | 0.00                         |
| 00  | Spec    | ·             | anti- anni anni anni farahadad in Para dan Fatilia  |  | 9.              | •                |                              |
| 20. |         |               | erty expenses not included in lines 4 or 5 of this son other property   |  | <b>γο</b><br>a. |                  | 0.00                         |
|     |         |               |   |  | ia.<br>Ib.      |                  | 0.00                         |
|     |         | Real estat    |   |  |                 | · —              | 0.00                         |
|     |         |               | homeowner's, or renter's insurance  |  | )C.             |                  | 0.00                         |
|     |         |               | nce, repair, and upkeep expenses  |  | d.              | ·                | 0.00                         |
|     |         |               | er's association or condominium dues  |  | e.              |                  | 0.00                         |
| 21. | Othe    | r: Specify:   | Cell Phone  |  | 21.             | +\$              | 75.00                        |
| 22. | Calcı   | ulate vour i  | monthly expenses  |  |                 |                  |                              |
|     |         | -             | through 21.   |  |                 | \$               | 1,145.00                     |
|     |         |               | 2 (monthly expenses for Debtor 2), if any, from Offici  | al Form 106J-2                           |                 | \$               |                              |
|     |         |               | a and 22b. The result is your monthly expenses.   |  |                 | \$               | 1 145 00                     |
|     | 220. /  | Auu IIIIE 226 | a and 22b. The result is your monthly expenses.   |  |                 | Ψ                | 1,145.00                     |
| 23. | Calcu   | ulate your ı  | monthly net income.   |  | •               |                  |                              |
|     | 23a.    | Copy line     | 12 (your combined monthly income) from Schedule I   | . 23                                     | a.              | \$               | 1,740.73                     |
|     | 23b.    | Copy your     | monthly expenses from line 22c above.   | 23                                       | b.              | -\$              | 1,145.00                     |
|     | 00 -    | 0             | and the land of the second of |  |                 |                  |                              |
|     | 23c.    |               | our monthly expenses from your monthly income. is your <i>monthly net income</i> .  | 23                                       | Bc.             | \$               | 595.73                       |
|     |         | THE TOOUR     | you. monthly not moonlo.  |  | ı               |                  | ı                            |
| 24. | Do yo   | ou expect a   | an increase or decrease in your expenses within   | the year after you file t                | his             | form?            |                              |
|     |         |               | ou expect to finish paying for your car loan within the year or   | do you expect your mortga                | ge p            | payment to incre | ase or decrease because of a |
|     |         |               | terms of your mortgage?   |  |                 |                  |                              |
|     | ■ No    | 0.            |   |  |                 |                  |                              |
|     | □Y€     | es.           | Explain here:   |  |                 |                  |                              |

| Fill in thi    | s information to identify your                                 | case:                      |                             |                                      |                   |
|----------------|--|----------------------------|-----------------------------|--------------------------------------|-------------------|
| Debtor 1       | Kobi K Gilkey  |                            |                             |                                      |                   |
| Debtor 2       | First Name   | Middle Name                | Last Name                   |                                      |                   |
| (Spouse if, fi | iling) First Name  | Middle Name                | Last Name                   |                                      |                   |
| United St      | ates Bankruptcy Court for the:                                 | EASTERN DISTRICT O         | F MISSOURI                  |                                      |                   |
| Case nun       | nber   |                            |                             |                                      |                   |
| (if known)     |  |                            |                             | _                                    | if this is an     |
|                |  |                            |                             | amend                                | ed filing         |
|                |  |                            |                             |                                      |                   |
| Official       | Form 106Dec  |                            |                             |                                      |                   |
| Decla          | aration About a  | an Individual              | <b>Debtor's Scl</b>         | hedules                              | 12/15             |
|                |  |                            |                             |                                      |                   |
| f two ma       | rried people are filing togethe                                | r, both are equally respor | nsible for supplying corre  | ect information.                     |                   |
| You must       | file this form whenever you f                                  | ile bankruptcy schedules   | or amended schedules.       | Making a false statement, concealing | g property, or    |
|                | money or property by fraud i both. 18 U.S.C. §§ 152, 1341,     |                            | ruptcy case can result in   | fines up to \$250,000, or imprisonme | nt for up to 20   |
| years, or      | botti. 16 0.3.C. 99 132, 1341,                                 | 1519, and 5571.            |                             |                                      |                   |
|                |  |                            |                             |                                      |                   |
|                | Sign Below   |                            |                             |                                      |                   |
| Did            | you pay or agree to pay some                                   | eone who is NOT an attor   | ney to help you fill out ba | inkruptcy forms?                     |                   |
|                |  |                            |                             |                                      |                   |
|                | No   |                            |                             |                                      |                   |
|                | Yes. Name of person  |                            |                             | Attach Bankruptcy Petition Pro       |                   |
|                |  |                            |                             | Declaration, and Signature (O        | iliciai Form 119) |
|                |  |                            |                             |                                      |                   |
|                | er penalty of perjury, I declare<br>they are true and correct. | that I have read the sumi  | mary and schedules filed    | with this declaration and            |                   |
| x /            | /s/ Kobi K Gilkey  |                            | X                           |                                      |                   |
|                | Kobi K Gilkey  |                            | Signature of D              | Debtor 2                             |                   |
|                | Signature of Debtor 1  |                            |                             |                                      |                   |
| ſ              | Date <b>May 5, 2022</b>  |                            | Date                        |                                      |                   |
|                | ,  |                            |                             |                                      |                   |

| 31         | l in this inforn   | nation to identify you  | r case:  |  |  |   |  |  |  |  |  |
|------------|--|---|--|--|--|---|--|--|--|--|--|
| De         | btor 1   | Kobi K Gilkey First Name  | Middle Name  | Last Name  |  |   |  |  |  |  |  |
| De         | btor 2   | i iist ivaine   | Wildle Name  | Last Name  |  |   |  |  |  |  |  |
| (Sp        | ouse if, filing)   | First Name  | Middle Name  | Last Name  |  |   |  |  |  |  |  |
| Un         | ited States Bar  | nkruptcy Court for the:   | EASTERN DISTRICT OF  | MISSOURI   |  |   |  |  |  |  |  |
| Ca         | se number  |   |  |  |  |   |  |  |  |  |  |
| (if k      | nown)  |   |  |  | _  |   |  |  |  |  |  |
|            |  |   |  |  |  | amended filing  |  |  |  |  |  |
| $\bigcirc$ | fficial Ea   | rm 107  |  |  |  |   |  |  |  |  |  |
|            | fficial Fo   |   | Affaira far Individ  | luale Filing for P                                       | ankruptov  | 0.4/0.0   |  |  |  |  |  |
|            |  |   | Affairs for Individ  |  |  | 04/22   |  |  |  |  |  |
|            |  |   | ble. If two married people a<br>attach a separate sheet to                                   |  |  |   |  |  |  |  |  |
| nur        | nber (if knowr   | n). Answer every que  | stion.   | •  |  |   |  |  |  |  |  |
| Pa         | rt 1: Give D   | etails About Your Ma  | rital Status and Where You   | Lived Before   |  |   |  |  |  |  |  |
| 1.         | What is your   | current marital statu   | ıs?  |  |  |   |  |  |  |  |  |
|            | ☐ Married  |   |  |  |  |   |  |  |  |  |  |
|            |  | Not married   |  |  |  |   |  |  |  |  |  |
| 2          | During the I   | During the last 3 years, have you lived anywhere other than where you live now? |  |  |  |   |  |  |  |  |  |
| 2.         | During the id  | ist 3 years, nave you   | iived arrywriere other than v  | where you live now?                                      |  |   |  |  |  |  |  |
|            | □ No   |   |  |  |  |   |  |  |  |  |  |
|            | ■ Yes. Lis   | t all of the places you i   | ived in the last 3 years. Do no  | ot include where you live nov                            | I.   |   |  |  |  |  |  |
|            | Debtor 1:  |   | Dates Debtor 1<br>lived there  | Debtor 2 Prior Ac  | ldress:  | Dates Debtor 2<br>lived there                         |  |  |  |  |  |
|            | 4340 Mary  | land Ave., Apt. 107   |  | ☐ Same as Debtor   | ☐ Same as Debtor 1   |   |  |  |  |  |  |
|            | Saint Loui   | s, MO 63108   |  | a same as pestor 1                                       |  | From-To:  |  |  |  |  |  |
|            | No Yes. Ma  rt 2 Explai  Did you have Fill in the total f you are filling No | n the Sources of You e any income from en                                       | nployment or from operatin<br>u received from all jobs and a<br>have income that you receive | g a business during this yell businesses, including part | ear or the two previous cale<br>time activities.<br>nder Debtor 1. | Ŵisconsin.)   |  |  |  |  |  |
|            |  |   | Debtor 1   | 0  | Debtor 2   | 0   |  |  |  |  |  |
|            |  |   | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions)    | Sources of income<br>Check all that apply.                         | Gross income<br>(before deductions<br>and exclusions) |  |  |  |  |  |
|            |  | of current year until<br>d for bankruptcy:                                      | ■ Wages, commissions, bonuses, tips  | \$0.00   | ☐ Wages, commissions, bonuses, tips                                |   |  |  |  |  |  |
|            |  |   | ☐ Operating a business   |  | ☐ Operating a business   |   |  |  |  |  |  |

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Case number (if known) Debtor 1 Kobi K Gilkey

|    |                                |                               |   | Debtor 1  |   | Debtor 2                                 | Debtor 2                 |   |
|----|--------------------------------|-------------------------------|---|---|---|--|--------------------------|---|
|    |                                |                               |   | Sources of income<br>Check all that apply.  | Gross income<br>(before deductions and<br>exclusions)                     |  |                          | Gross income<br>(before deductions<br>and exclusions) |
|    | r last cale<br>anuary 1 to     | ndar year:<br>December        | 31, 2021 )  | ■ Wages, commissions, bonuses, tips   | \$30,152.30   | ☐ Wages, combonuses, tips                | ımissions,               |   |
|    |                                |                               |   | ☐ Operating a business  |   | ☐ Operating a                            | business                 |   |
|    |                                | dar year be<br>December       |   | ■ Wages, commissions, bonuses, tips   | \$0.00  | ☐ Wages, combonuses, tips                | ımissions,               |   |
|    |                                |                               |   | ☐ Operating a business  |   | ☐ Operating a                            | business                 |   |
|    | and other winnings.  List each | public bene<br>If you are fil | fit payments;<br>ing a joint ca<br>the gross inc              | ther that income is taxable. Exact pensions; rental income; interse and you have income that your from each source separate.                                  | rest; dividends; money collectory to received together, list it           | cted from lawsuits;<br>only once under D | royalties; a<br>ebtor 1. |   |
|    |                                |                               |   | Debtor 1  |   | Debtor 2                                 |                          |   |
|    |                                |                               |   | Sources of income<br>Describe below.  | Gross income from<br>each source<br>(before deductions and<br>exclusions) | Sources of inc<br>Describe below         |                          | Gross income<br>(before deductions<br>and exclusions) |
| Pa | rt 3: Lis                      | t Certain Pa                  | ayments You   | u Made Before You Filed for   | Bankruptcy  |  |                          |   |
| 5. | Are eithe ☐ No.                | Neither D<br>individual       | ebtor 1 nor l<br>primarily for a<br>90 days bef<br>Go to line | 2's debts primarily consumer Debtor 2 has primarily consumer a personal, family, or househower you filed for bankruptcy, di 7.  each creditor to whom you pai | imer debts. Consumer debild purpose."  d you pay any creditor a tota      | al of \$7,575* or mo                     | re?                      |   |
|    |                                |                               | paid that c<br>not include                                    | reditor. Do not include paymer<br>e payments to an attorney for that<br>on 4/01/25 and every 3 years  | nts for domestic support obli<br>nis bankruptcy case.                     | gations, such as ch                      | nild support             | and alimony. Also, do                                 |
|    | ■ Yes.                         |                               |   | or both have primarily consu  |   | al of \$600 or more?                     | ?                        |   |
|    |                                | □ No.                         | Go to line  | 7.  |   |  |                          |   |
|    |                                | ■ Yes                         | include pa  | each creditor to whom you pai<br>yments for domestic support o<br>or this bankruptcy case.  |   |  |                          |   |
|    | Creditor                       | 's Name an                    | d Address   | Dates of payme  | nt Total amount paid  | Amount you still owe                     | Was this                 | payment for   |
|    | Rent                           |                               |   | Last 3 Months   | ·   | \$0.00                                   |                          | Card<br>Repayment<br>ers or vendors                   |

Filed 05/05/22 Entered 05/05/22 15:51:00 Case 22-41362 Doc 1 Main Document Pg 33 of 50 Case number (if known) Debtor 1 Kobi K Gilkey Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. □ No Yes. List all payments to an insider. **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment paid still owe Mother In last 12 months \$2,000.00 \$0.00 Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Nο ☐ Yes. List all payments to an insider Reason for this payment Insider's Name and Address Dates of payment **Total amount** Amount you still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No п Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below.

| Creditor Name and Address | Describe the Property                              | Date    | Value of the property |  |  |
|---------------------------|--|---------|-----------------------|--|--|
|                           | Explain what happened                              |         | , , ,                 |  |  |
| Santander                 | 2020 GMC Terrain                                   | 4/27/22 | \$0.00                |  |  |
| PO Box 660633             |  |         |                       |  |  |
| Dallas, TX 75266          | Property was repossessed.                          |         |                       |  |  |
|                           | ☐ Property was foreclosed.                         |         |                       |  |  |
|                           | ☐ Property was garnished.                          |         |                       |  |  |
|                           | $\square$ Property was attached, seized or levied. |         |                       |  |  |
|                           |  |         |                       |  |  |

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

Yes. Fill in the details.

**Creditor Name and Address** Describe the action the creditor took Date action was Amount taken

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No

П Yes

Official Form 107

Debtor 1 Kobi K Gilkey Pg 34 of 50 Case number (if known)

| Pa  | tt 5: List Certain Gifts and Contributions   | <b>S</b> |   |   |                           |
|-----|--|----------|---|---|---------------------------|
| 13. | Within 2 years before you filed for bankru  ■ No □ Yes. Fill in the details for each gift.   | ıptcy,   | did you give any gifts with a total value of more th  | han \$600 per person                    | ?                         |
|     | Gifts with a total value of more than \$600 per person   | )        | Describe the gifts  | Dates you gave the gifts                | Value                     |
|     | Person to Whom You Gave the Gift and Address:  |          |   |   |                           |
| 14. | Within 2 years before you filed for bankru  ■ No □ Yes. Fill in the details for each gift or co  |          | did you give any gifts or contributions with a tota   | I value of more than                    | \$600 to any charity?     |
|     | Gifts or contributions to charities that to<br>more than \$600<br>Charity's Name<br>Address (Number, Street, City, State and ZIP Code) | otal     | Describe what you contributed   | Dates you contributed                   | Value                     |
| Pa  | rt 6: List Certain Losses  |          |   |   |                           |
| 15. | Within 1 year before you filed for bankrup or gambling?  No Yes. Fill in the details.  | otcy o   | r since you filed for bankruptcy, did you lose anyt   | hing because of the                     | ft, fire, other disaster, |
|     | how the loss occurred  | Includ   | ribe any insurance coverage for the loss e the amount that insurance has paid. List pending ince claims on line 33 of Schedule A/B: Property. | Date of your loss                       | Value of property lost    |
| Pa  | rt 7: List Certain Payments or Transfers   |          |   |   |                           |
| 16. | consulted about seeking bankruptcy or p  | repari   | lid you or anyone else acting on your behalf pay or<br>ing a bankruptcy petition?<br>rs, or credit counseling agencies for services required  |   | rty to anyone you         |
|     | □ No   |          |   |   |                           |
|     | Yes. Fill in the details.  |          |   |   |                           |
|     | Person Who Was Paid<br>Address<br>Email or website address<br>Person Who Made the Payment, if Not Yo                                   | ou       | Description and value of any property transferred   | Date payment<br>or transfer was<br>made | Amount of payment         |
|     | Robert E. Faerber<br>230 S. Bemiston, Suite 600<br>Clayton, MO 63105   |          |   | 5-4-22                                  | \$300.00                  |
| 17. | Within 1 year before you filed for bankrup promised to help you deal with your cred Do not include any payment or transfer that        | itors o  |   | or transfer any prope                   | rty to anyone who         |
|     | ■ No □ Yes. Fill in the details.   |          |   |   |                           |
|     | Person Who Was Paid Address  |          | Description and value of any property transferred   | Date payment or transfer was            | Amount of payment         |
|     |  |          |   | made                                    |                           |

Pg 35 of 50 Case number (if known) Debtor 1 Kobi K Gilkey 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. **Person Who Received Transfer** Description and value of Date transfer was Describe any property or **Address** property transferred payments received or debts made paid in exchange Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred Date Transfer was made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Nο Yes. Fill in the details. Last 4 digits of Last balance Name of Financial Institution and Type of account or Date account was Address (Number, Street, City, State and ZIP account number instrument closed, sold, before closing or Code) moved, or transfer transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still Address (Number, Street, City, have it? Address (Number, Street, City, State and ZIP Code) State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Name of Storage Facility Describe the contents Who else has or had access Do you still Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, Part 9: Identify Property You Hold or Control for Someone Else Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

No

Yes. Fill in the details.

Owner's Name Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP

Describe the property

Value

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

Case 22-41362 Filed 05/05/22 Entered 05/05/22 15:51:00 Doc 1 Main Document Pg 36 of 50

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

Debtor 1 Kobi K Gilkey

Case number (if known)

|     | regulations controlling the cleanup of these substances, wastes, or material.   |  |   |                    |
|-----|---|--|---|--------------------|
|     | Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. |  |   |                    |
|     | Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.   |  |   |                    |
| Rep | ort all notices, releases, and proceedings that   | at you know about, regardless of when                                      | they occurred.  |                    |
| 24. | 1. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?   |  |   |                    |
|     | ■ No □ Yes. Fill in the details.  |  |   |                    |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)  | Governmental unit<br>Address (Number, Street, City, State and<br>ZIP Code) | Environmental law, if you know it                               | Date of notice     |
| 25. | Have you notified any governmental unit of any release of hazardous material?   |  |   |                    |
|     | ■ No □ Yes. Fill in the details.  |  |   |                    |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)  | Governmental unit<br>Address (Number, Street, City, State and<br>ZIP Code) | Environmental law, if you know it                               | Date of notice     |
| 26. | Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.   |  |   |                    |
|     | ■ No □ Yes. Fill in the details.  |  |   |                    |
|     | Case Title Case Number  | Court or agency Name Address (Number, Street, City, State and ZIP Code)    | Nature of the case  | Status of the case |
| Par | t 11: Give Details About Your Business or   | Connections to Any Business  |   |                    |
|     | Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?  |  |   |                    |
|     | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time   |  |   |                    |
|     | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)  |  |   |                    |
|     | ☐ A partner in a partnership  |  |   |                    |
|     | ☐ An officer, director, or managing executive of a corporation  |  |   |                    |
|     | ☐ An owner of at least 5% of the voting or equity securities of a corporation   |  |   |                    |
|     | ■ No. None of the above applies. Go to Part 12.   |  |   |                    |
|     | ☐ Yes. Check all that apply above and fill  | in the details below for each business                                     | i <u>.</u>  |                    |
|     | Business Name I<br>Address  | Describe the nature of the business  | Employer Identification numbe<br>Do not include Social Security |                    |
|     | (Number, Street, City, State and ZIP Code)  | Name of accountant or bookkeeper   | Dates business existed  | number of frite.   |
| 28. | Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.  |  |   |                    |
|     | ■ No □ Yes. Fill in the details below.  |  |   |                    |
|     | Name<br>Address   | Date Issued  |   |                    |
|     | (Number, Street, City, State and ZIP Code)  |  |   |                    |

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy page 6 Case 22-41362 Doc 1 Filed 05/05/22 Entered 05/05/22 15:51:00 Main Document

Debtor 1 Kobi K Gilkey Pg 37 of 50

Case number (if known)

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

18 U.S.C. §§ 152, 1341, 1519, and 3571.

| /s/ Kobi K Gilkey |                       |  |  |  |  |  |
|-------------------|-----------------------|--|--|--|--|--|
| Kobi              | K Gilkey              | Signature of Debtor 2  |  |  |  |  |
| Signa             | ture of Debtor 1      |  |  |  |  |  |
| Date              | May 5, 2022           | Date   |  |  |  |  |
| Did yo            | u attach additional į | ages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? |  |  |  |  |
| ■ No              |                       |  |  |  |  |  |
| ☐ Yes             |                       |  |  |  |  |  |
| Did yo            | u pay or agree to pa  | y someone who is not an attorney to help you fill out bankruptcy forms?                                |  |  |  |  |
| No                |                       |  |  |  |  |  |
| ☐ Yes             | . Name of Person      | . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).    |  |  |  |  |

## Case 22-41362 Doc 1 Filed 05/05/22 Entered 05/05/22 15:51:00 Main Document Pg 38 of 50

| Fill in this information to identify your case: |  |  |  |  |
|---|--|--|--|--|
| Debtor 1  | Kobi K Gilkey  |  |  |  |
| Debtor 2<br>(Spouse, if filing)                 |  |  |  |  |
| United States E                                 | Bankruptcy Court for the: Eastern District of Missouri |  |  |  |
| Case number                                     |  |  |  |  |
|   |  |  |  |  |

| Check  | Check as directed in lines 17 and 21:                         |  |  |  |  |  |
|--|---|--|--|--|--|--|
|  | According to the calculations required by this Statement:     |  |  |  |  |  |
| <ul> <li>1. Disposable income is not determined ur</li> <li>11 U.S.C. § 1325(b)(3).</li> </ul> |   |  |  |  |  |  |
|  | Disposable income is determined under 11 U.S.C. § 1325(b)(3). |  |  |  |  |  |
| 3. The commitment period is 3 years.   |   |  |  |  |  |  |
|  | 4. The commitment period is 5 years.                          |  |  |  |  |  |

☐ Check if this is an amended filing

### Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

| Par      | 1: Calculate Your Average Monthly Income  |                                  |                    |                                       |                      |                    |  |                                 |
|----------|---|----------------------------------|--------------------|---------------------------------------|----------------------|--------------------|--|---------------------------------|
| 1.       | What is your marital and filing status? Check one of  | only.                            |                    |                                       |                      |                    |  |                                 |
|          | ■ Not married. Fill out Column A, lines 2-11.   |                                  |                    |                                       |                      |                    |  |                                 |
|          | ☐ Married. Fill out both Columns A and B, lines 2-11  |                                  |                    |                                       |                      |                    |  |                                 |
| 10<br>th | Il in the average monthly income that you received from a<br>11(10A). For example, if you are filing on September 15, the 6-<br>e 6 months, add the income for all 6 months and divide the tot<br>louses own the same rental property, put the income from that | month period<br>al by 6. Fill in | d would<br>the res | be March 1 thro<br>sult. Do not inclu | ugh Aug<br>de any ii | ust 31. If the amo | ount of your monthly incom<br>ore than once. For examp | ne varied during<br>le, if both |
|          |   |                                  |                    |                                       | Colun<br>Debto       |                    | Column B Debtor 2 or non-filing spouse                 |                                 |
| 2.       | Your gross wages, salary, tips, bonuses, overtime payroll deductions).  | e, and comr                      | missio             | ons (before all                       | \$                   | 2,715.45           | \$   |                                 |
| 3.       | <b>Alimony and maintenance payments.</b> Do not includ Column B is filled in.   | e payments                       | s from             | a spouse if                           | \$                   | 0.00               | \$   |                                 |
| 4.       | All amounts from any source which are regularly polyou or your dependents, including child suppoint from an unmarried partner, members of your househout and roommates. Do not include payments from a sporyou listed on line 3.                                | rt. Include re<br>old, your dep  | egular<br>pende    | contributions<br>nts, parents,        | \$                   | 0.00               | \$   |                                 |
| 5.       | Net income from operating a business, profession, or farm   | Debtor 1                         |                    |                                       |                      |                    |  |                                 |
|          | Gross receipts (before all deductions)  | · ·                              | 0.00               |                                       |                      |                    |  |                                 |
|          | Ordinary and necessary operating expenses   | · ·                              | 0.00               |                                       |                      |                    |  |                                 |
|          | Net monthly income from a business, profession, or fa   | arm \$                           | 0.00               | Copy here ->                          | •\$                  | 0.00               | \$   |                                 |
| 6.       | Net income from rental and other real property  | Debtor 1                         |                    |                                       |                      |                    |  |                                 |
|          | Gross receipts (before all deductions)  | · · ·                            | 0.00               |                                       |                      |                    |  |                                 |
|          | Ordinary and necessary operating expenses   | · · ·                            | 0.00               |                                       | _                    |                    |  |                                 |
|          | Net monthly income from rental or other real property   | Φ (                              | 0.00               | Copy here ->                          | • S                  | 0.00               | \$   |                                 |

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Case 22-41362 Doc 1 Filed 05/05/22 Entered 05/05/22 15:51:00 Main Document

Pg 39 of 50 Debtor 1 Kobi K Gilkey Case number (if known) Column A Column R Debtor 1 Debtor 2 or non-filing spouse 0.00 \$ 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you\_\_\_\_\_ For your spouse\_\_\_\_\_ 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled 0.00 if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 Total amounts from separate pages, if any. + \$ 0.00 11. Calculate your total average monthly income. Add lines 2 through 10 for 2,715.45 2.715.45 \$ each column. Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 2,715.45 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. ☐ You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. 0.00 0.00 Copy here=> 2.715.45

15. Calculate your current monthly income for the year. Follow these steps:

14. Your current monthly income. Subtract line 13 from line 12.

15a. Copy line 14 here=>

2,715.45

# Case 22-41362 Doc 1 Filed 05/05/22 Entered 05/05/22 15:51:00 Main Document Pg 40 of 50

| Debtor | 1           | Kobi                  | K Gilkey  | Case number (if known)  |                                |
|--------|-------------|-----------------------|---|---|--------------------------------|
|        |             | Mul                   | tiply line 15a by 12 (the number of months  | in a year).   | <b>x</b> 12                    |
|        | 15          | b. The                | e result is your current monthly income for the   | he year for this part of the form.  | \$32,585.40                    |
| 16. (  | Cal         | culate t              | the median family income that applies to  | you. Follow these steps:  |                                |
|        | 16a         | . Fill in             | the state in which you live.  | MO  |                                |
|        | 16b         | . Fill in             | the number of people in your household.   | 1   |                                |
|        | 16c.        |                       | the median family income for your state and   | d size of household.  ats, go online using the link specified in the separate   | \$53,547.00                    |
|        |             | instru                | ctions for this form. This list may also be av-   |   |                                |
| 17. I  | Hov         | v do th               | e lines compare?  |   |                                |
| ,      | 17a         | . •                   |   | On the top of page 1 of this form, check box 1, <i>Disposable</i> NOT fill out <i>Calculation of Your Disposable Income</i> (Official   |                                |
|        | 17b         | . 🗆                   |   | p of page 1 of this form, check box 2, <i>Disposable income is</i> culation of Your Disposable Income (Official Form 122C above.  |                                |
| Part 3 | 3:          | Cald                  | culate Your Commitment Period Under 1   | 1 U.S.C. § 1325(b)(4)   |                                |
| 18. (  | Сор         | y your                | total average monthly income from line  | 11.   | \$\$                           |
| (      | cont<br>spo | tend that<br>use's in | at calculating the commitment period under come, copy the amount from line 13.          | re married, your spouse is not filing with you, and you 11 U.S.C. § 1325(b)(4) allows you to deduct part of your  | 0.00                           |
|        | 19a         | . If the i            | marital adjustment does not apply, fill in 0 o  | in line 19a.  | -\$0.00                        |
|        | 19b         | . Subtr               | act line 19a from line 18.  |   | \$\$                           |
| 20. (  | Cal         | culate y              | your current monthly income for the yea   | r. Follow these steps:  |                                |
| 2      | 20a         | . Сору                | line 19b  |   | \$2,715.45                     |
|        |             | Multip                | ly by 12 (the number of months in a year).  |   | <b>x</b> 12                    |
| 2      | 20b         | . The re              | esult is your current monthly income for the  | year for this part of the form  | \$32,585.40                    |
| 2      | 20c.        | . Сору                | the median family income for your state and   | d size of household from line 16c   | \$53,547.00                    |
| 2      | 21.         | How                   | do the lines compare?   |   |                                |
|        |             |                       | ine 20b is less than line 20c. Unless otherw<br>period is 3 years. Go to Part 4.        | wise ordered by the court, on the top of page 1 of this form,   | check box 3, The commitment    |
|        |             |                       | ine 20b is more than or equal to line 20c. Use mitment period is 5 years. Go to Part 4. | Unless otherwise ordered by the court, on the top of page 1 of the court, on the top of page 1 of the court, on the top of page 1 of the court, on the top of page 1 of the court, on the top of page 1 of the court, on the top of page 1 of the court, on the top of page 1 of the court, on the top of page 1 of the court, on the top of page 1 of the court, on the top of page 1 of the court, on the top of page 1 of the court, on the top of page 1 of the court, on the top of page 1 of the court, on the top of page 1 of the court, on the top of page 1 of the court, on the top of page 1 of the court, on the top of page 1 of the court, on the top of page 1 of the court, on the top of page 1 of the court, on the top of the court, on the court of the court, on the court of | of this form, check box 4, The |
|        | By s        | signing               | n Below<br>here, under penalty of perjury I declare that<br>K Gilkey                    | t the information on this statement and in any attachments is   | s true and correct.            |
| ^      | Ko          | bi K (                | -   |   |                                |
| [      | Date        |                       | 5, 2022<br>(DD / YYYY   |   |                                |
| ı      | lf yo       |                       | ked 17a, do NOT fill out or file Form 122C-2  | 2.  |                                |
| ı      | lf yo       | u chec                | ked 17b, fill out Form 122C-2 and file it with  | n this form. On line 39 of that form, copy your current monthl  | y income from line 14 above.   |

Case 22-41362 Doc 1 Filed 05/05/22 Entered 05/05/22 15:51:00 Main Document Pg 41 of 50

Debtor 1 Kobi K Gilkey Case number (if known)

Debtor 1 Kobi K Gilkey Case number (if known)

### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 11/01/2021 to 04/30/2022.

#### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Lyft Income by Month:

| 6 Months Ago: | 11/2021            | \$2,133.92 |
|---------------|--------------------|------------|
| 5 Months Ago: | 12/2021            | \$2,537.64 |
| 4 Months Ago: | 01/2022            | \$2,983.89 |
| 3 Months Ago: | 02/2022            | \$2,441.59 |
| 2 Months Ago: | 03/2022            | \$2,811.11 |
| Last Month:   | 04/2022            | \$3,384.53 |
|               | Average per month: | \$2,715.45 |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: |          | er 7:       | Liquidation        |
|------------|----------|-------------|--------------------|
|            |          | \$245       | filing fee         |
|            |          | \$78        | administrative fee |
|            | <u>+</u> | <u>\$15</u> | trustee surcharge  |
|            |          | \$338       | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$78  | administrative fee |
|   | \$278 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$78  | administrative fee |
|   | \$313 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Case 22-41362 Doc 1 Filed 05/05/22 Entered 05/05/22 15:51:00 Main Document Pg 46 of 50

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses">http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses</a>.

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/services-forms/bankruptcy/cre">http://www.uscourts.gov/services-forms/bankruptcy/cre</a> dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 22-41362 Doc 1 Filed 05/05/22 Entered 05/05/22 15:51:00 Main Document Pg 47 of 50

B2030 (Form 2030) (12/15)

### United States Bankruptcy Court Eastern District of Missouri

| In re       | Kobi K Gilkey  |   | Case No.               |                                     |  |
|-------------|--|---|------------------------|-------------------------------------|--|
|             |  | Debtor(s)   | Chapter                | 13                                  |  |
|             | DISCLOSURE OF COMPEN   | SATION OF ATTO  | RNEY FOR DE            | CBTOR(S)                            |  |
| C           | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b<br>compensation paid to me within one year before the filing<br>be rendered on behalf of the debtor(s) in contemplation of  | of the petition in bankruptcy,  | or agreed to be paid   | to me, for services rendered or to  |  |
|             | For legal services, I have agreed to accept  |   | \$                     | 4,800.00                            |  |
|             | Prior to the filing of this statement I have received  |   | \$                     | 300.00                              |  |
|             | Balance Due  |   | \$                     | 4,500.00                            |  |
| 2. 7        | The source of the compensation paid to me was:   |   |                        |                                     |  |
|             | ■ Debtor □ Other (specify):  |   |                        |                                     |  |
| 3.          | The source of compensation to be paid to me is:  |   |                        |                                     |  |
|             | ■ Debtor □ Other (specify):  |   |                        |                                     |  |
| 4.          | ☐ I have not agreed to share the above-disclosed compet  | nsation with any other person   | unless they are memb   | bers and associates of my law firm. |  |
|             | ■ I have agreed to share the above-disclosed compensat copy of the agreement, together with a list of the name Law \$200.00  |   |                        |                                     |  |
| 5.          | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:  |   |                        |                                     |  |
| t<br>c      | <ul> <li>Analysis of the debtor's financial situation, and rendering</li> <li>Preparation and filing of any petition, schedules, stater</li> <li>Representation of the debtor at the meeting of creditors</li> <li>[Other provisions as needed]</li> </ul> | ment of affairs and plan which  | may be required;       |                                     |  |
| 5. I        | By agreement with the debtor(s), the above-disclosed fee   | does not include the following  | g service:             |                                     |  |
|             |  | CERTIFICATION   |                        |                                     |  |
| I<br>this b | certify that the foregoing is a complete statement of any ankruptcy proceeding.  | agreement or arrangement for  | payment to me for re   | epresentation of the debtor(s) in   |  |
| М           | ay 5, 2022   | /s/ Robert Faerbe   | er                     |                                     |  |
| D           | ate  | Robert Faerber Signature of Attorne Robert Faerber 230 S. Bemistion Suite 600 Saint Louis, MO | 631 <b>05</b>          |                                     |  |
|             |  | faerber@msn.co  | ax: (314)727-6992<br>m |                                     |  |
|             |  | Name of law firm  |                        |                                     |  |

## Case 22-41362 Doc 1 Filed 05/05/22 Entered 05/05/22 15:51:00 Main Document Pg 48 of 50

### United States Bankruptcy Court Eastern District of Missouri

| In re | Kobi K Gilkey                            |                            | Case No.           |                             |
|-------|--|----------------------------|--------------------|-----------------------------|
|       |  | Debtor(s)                  | Chapter            | 13                          |
|       |  |                            |                    |                             |
|       |  |                            |                    |                             |
|       | VERIFICATION                             | ON OF CREDITOR M           | ATRIX              |                             |
|       |  |                            |                    |                             |
|       | The above named debtor(s) hereby certif  | fies/certify under penalty | of perjury tha     | at the attached list        |
|       | ning the names and addresses of my credi | tors (Matrix), consisting  | of <u>2</u> page(s | s) and is true, correct and |
| compl | ete.                                     |                            |                    |                             |
|       |  |                            |                    |                             |
|       |  |                            |                    |                             |
|       |  |                            |                    |                             |
|       |  | /s/ Kobi K Gilkey          |                    |                             |
|       |  | Kobi K Gilkey              |                    |                             |
|       |  | Debtor Signature           |                    |                             |
|       |  |                            |                    |                             |
|       |  |                            |                    |                             |

Dated: May 5, 2022

Banfield Pet Hospital c/o IC System PO Box 64378 St. Paul, MN 55164

Caine & Weiner PO Box 55848 Sherman Oaks, CA 91413

Charter Communications c/o CBE Group 1309 Technology Parkway Cedar Falls, IA 50613

Harris Stowe 3026 Laclede St. Louis, MO 63103

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101

Lend Nation 9905 St. Charles Rock Road Saint Ann, MO 63074

Liberty Mutual 1 Liberty Square Mishawaka, IN 46544

Missouri Department of Revenue PO Box 475 Jefferson City, MO 65105

Missouri Title Loan 6985 Olive Blvd St. Louis, MO 63130

Portfolio Recovery 120 Corporate Blvd. Norfolk, VA 23502

Santander PO Box 660633 Dallas, TX 75266

SC Wide LLC 1 North Taylor Saint Louis, MO 63108

United States Attorney 111 South 10th Street 20th Floor Saint Louis, MO 63102 US Department Of Education 2401 International Madison, WI 53704